

3.4 How Much does the Medicare Population Spend on Health Care and Who Pays for Their Care?

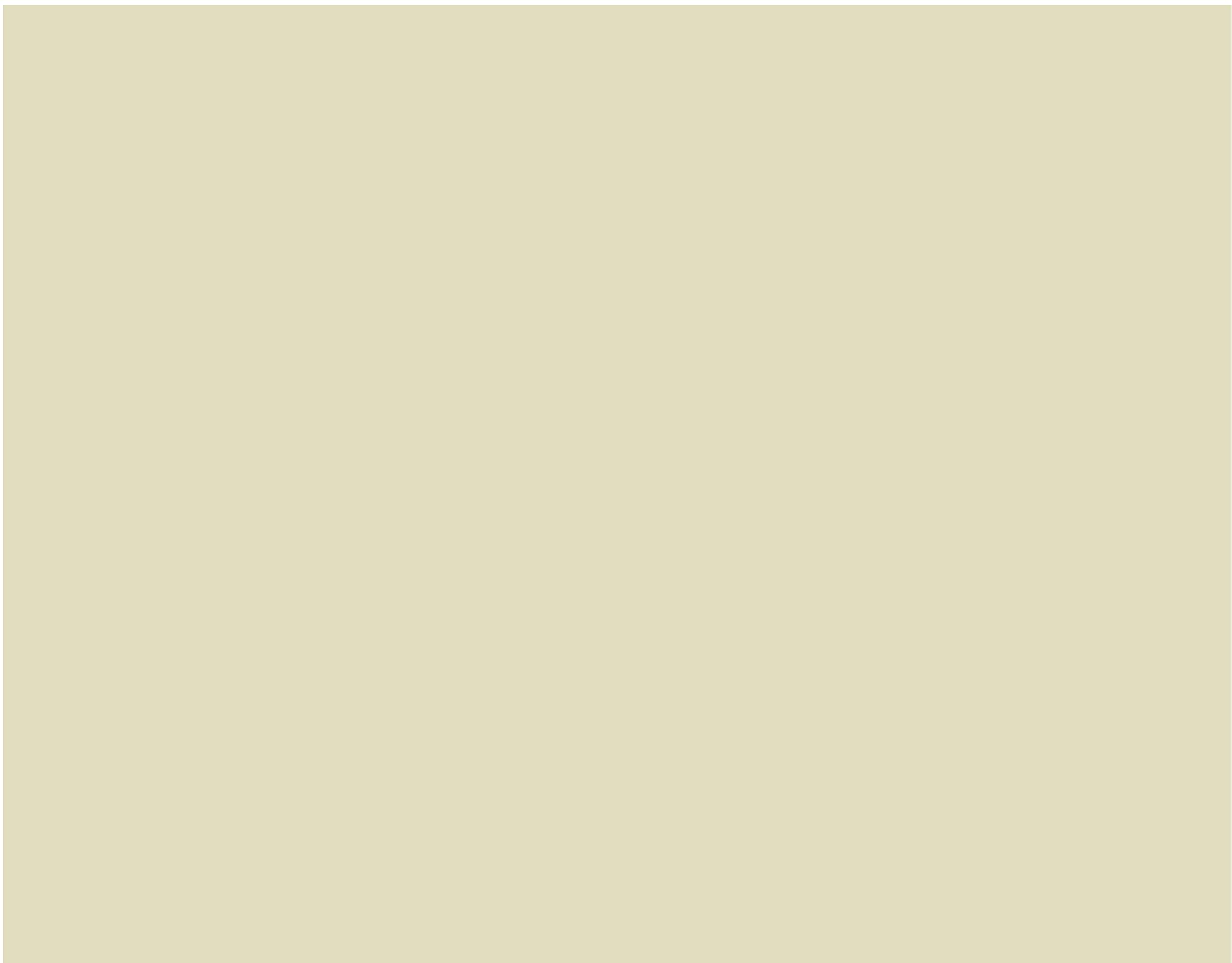


Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1998

All Medicare Beneficiaries

1 of 3

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Total Medical Services						
All beneficiaries	\$368,321	54.35	12.35	10.68	19.29	3.33
	<i>7,256</i>	<i>0.69</i>	<i>0.56</i>	<i>0.27</i>	<i>0.46</i>	<i>0.26</i>
Beneficiaries 65 years and older	308,427	55.68	10.61	10.76	20.63	2.32
	<i>5,217</i>	<i>0.70</i>	<i>0.52</i>	<i>0.26</i>	<i>0.47</i>	<i>0.15</i>
Beneficiaries 64 years and younger	59,895	47.51	21.31	10.24	12.40	8.53
	<i>4,349</i>	<i>2.96</i>	<i>1.95</i>	<i>1.04</i>	<i>0.89</i>	<i>1.45</i>
Inpatient Hospital Services						
All beneficiaries	102,910	89.15	1.10	6.40	2.58	0.77
	<i>3,478</i>	<i>0.65</i>	<i>0.09</i>	<i>0.51</i>	<i>0.27</i>	<i>0.12</i>
Beneficiaries 65 years and older	87,090	90.24	0.87	5.67	2.56	0.65
	<i>2,871</i>	<i>0.57</i>	<i>0.06</i>	<i>0.40</i>	<i>0.31</i>	<i>0.12</i>
Beneficiaries 64 years and younger	15,820	83.14	2.34	10.37	2.67	1.48
	<i>1,554</i>	<i>2.34</i>	<i>0.38</i>	<i>2.06</i>	<i>0.53</i>	<i>0.36</i>
Outpatient Hospital Services						
All beneficiaries	33,514	61.29	4.34	20.43	10.86	3.08
	<i>1,258</i>	<i>1.43</i>	<i>0.56</i>	<i>0.62</i>	<i>1.20</i>	<i>0.36</i>
Beneficiaries 65 years and older	26,064	62.03	2.75	22.09	10.01	3.12
	<i>879</i>	<i>1.21</i>	<i>0.25</i>	<i>0.54</i>	<i>1.23</i>	<i>0.44</i>
Beneficiaries 64 years and younger	7,450	58.67	9.92	14.60	13.82	2.97
	<i>841</i>	<i>4.08</i>	<i>2.42</i>	<i>2.57</i>	<i>2.68</i>	<i>0.83</i>
Physician/Supplier Services						
All beneficiaries	86,457	66.87	3.19	13.20	15.31	1.42
	<i>1,508</i>	<i>0.73</i>	<i>0.75</i>	<i>0.40</i>	<i>0.46</i>	<i>0.23</i>
Beneficiaries 65 years and older	73,928	69.35	1.38	13.30	15.08	0.89
	<i>1,344</i>	<i>0.57</i>	<i>0.08</i>	<i>0.33</i>	<i>0.46</i>	<i>0.08</i>
Beneficiaries 64 years and younger	12,529	52.22	13.91	12.60	16.68	4.60
	<i>821</i>	<i>3.03</i>	<i>4.65</i>	<i>1.56</i>	<i>1.41</i>	<i>1.48</i>

Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1998

All Medicare Beneficiaries

2 of 3

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Dental Services						
All beneficiaries	\$8,988	1.43	0.96	16.83	78.22	2.57
	<i>353</i>	<i>0.08</i>	<i>0.18</i>	<i>1.00</i>	<i>1.08</i>	<i>0.60</i>
Beneficiaries 65 years and older	8,160	1.48	0.60	16.73	79.24	1.95
	<i>312</i>	<i>0.08</i>	<i>0.17</i>	<i>1.01</i>	<i>1.11</i>	<i>0.64</i>
Beneficiaries 64 years and younger	828	0.92	4.43	17.77	68.16	8.72
	<i>105</i>	<i>0.15</i>	<i>1.05</i>	<i>2.82</i>	<i>3.87</i>	<i>1.99</i>
Prescription Medicines						
All beneficiaries	32,961	4.72	11.98	33.77	41.92	7.60
	<i>493</i>	<i>0.16</i>	<i>0.81</i>	<i>0.66</i>	<i>0.57</i>	<i>0.51</i>
Beneficiaries 65 years and older	27,033	5.37	8.23	35.33	44.43	6.65
	<i>415</i>	<i>0.18</i>	<i>0.78</i>	<i>0.68</i>	<i>0.62</i>	<i>0.50</i>
Beneficiaries 64 years and younger	5,928	1.80	29.09	26.69	30.51	11.91
	<i>259</i>	<i>0.20</i>	<i>1.94</i>	<i>1.67</i>	<i>1.32</i>	<i>1.41</i>
Medicare Hospice Services						
All beneficiaries	1,866	100.00	0.00	0.00	0.00	0.00
	<i>262</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
Beneficiaries 65 years and older	1,731	100.00	0.00	0.00	0.00	0.00
	<i>227</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
Beneficiaries 64 years and younger	135	100.00	0.00	0.00	0.00	0.00
	<i>107</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
Medicare Home Health Services						
All beneficiaries	12,879	91.79	0.91	0.50	6.30	0.50
	<i>771</i>	<i>2.10</i>	<i>0.51</i>	<i>0.16</i>	<i>2.08</i>	<i>0.23</i>
Beneficiaries 65 years and older	11,335	92.26	0.14	0.37	7.11	0.12
	<i>708</i>	<i>2.29</i>	<i>0.08</i>	<i>0.15</i>	<i>2.33</i>	<i>0.09</i>
Beneficiaries 64 years and younger	1,544	88.31	6.57	1.46	0.38	3.28
	<i>290</i>	<i>4.84</i>	<i>4.19</i>	<i>1.12</i>	<i>0.27</i>	<i>1.86</i>

Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1998

All Medicare Beneficiaries

3 of 3

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Long-Term Facility Care¹						
All beneficiaries	\$88,747	16.58	40.55	2.00	33.65	7.22
	<i>3,725</i>	<i>1.93</i>	<i>1.64</i>	<i>0.24</i>	<i>1.50</i>	<i>0.95</i>
Beneficiaries 65 years and older	73,086	16.33	38.22	2.33	38.80	4.32
	<i>2,684</i>	<i>0.76</i>	<i>1.42</i>	<i>0.28</i>	<i>1.17</i>	<i>0.50</i>
Beneficiaries 64 years and younger	15,661	17.75	51.41	0.48	9.64	20.73
	<i>2,735</i>	<i>10.16</i>	<i>7.13</i>	<i>0.26</i>	<i>2.11</i>	<i>5.16</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year; facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year; and expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year or part-year community residents, which were reported during a community interview or created through Medicare claims. See Appendix B for additional information.

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$87,977	88.50	0.83	7.10	2.71	0.86	\$2,354
	<i>3,234</i>	<i>0.75</i>	<i>0.07</i>	<i>0.59</i>	<i>0.31</i>	<i>0.14</i>	<i>88</i>
Medicare Status³							
Aged							
65 - 74 years	34,624	88.82	0.66	6.43	3.53	0.56	1,896
	<i>1,931</i>	<i>1.20</i>	<i>0.11</i>	<i>0.90</i>	<i>0.77</i>	<i>0.20</i>	<i>108</i>
75 - 84 years	30,015	90.68	0.49	6.03	1.83	0.97	2,681
	<i>1,744</i>	<i>0.71</i>	<i>0.06</i>	<i>0.48</i>	<i>0.28</i>	<i>0.24</i>	<i>151</i>
85 years and older	9,688	90.45	0.89	5.99	2.26	0.40	3,130
	<i>692</i>	<i>0.81</i>	<i>0.12</i>	<i>0.60</i>	<i>0.47</i>	<i>0.23</i>	<i>210</i>
Disabled							
Under 45 years	3,960	79.83	3.25	13.81	2.03	1.09	2,603
	<i>639</i>	<i>4.77</i>	<i>0.45</i>	<i>4.85</i>	<i>0.52</i>	<i>0.45</i>	<i>409</i>
45 - 64 years	9,691	82.19	1.43	11.16	3.25	1.97	2,931
	<i>1,219</i>	<i>3.14</i>	<i>0.32</i>	<i>2.69</i>	<i>0.77</i>	<i>0.53</i>	<i>355</i>
Gender							
Male	44,369	87.88	0.66	7.08	2.93	1.44	2,664
	<i>2,102</i>	<i>1.01</i>	<i>0.10</i>	<i>0.70</i>	<i>0.56</i>	<i>0.24</i>	<i>124</i>
Female	43,608	89.13	1.00	7.11	2.49	0.27	2,104
	<i>1,992</i>	<i>1.00</i>	<i>0.10</i>	<i>0.76</i>	<i>0.66</i>	<i>0.09</i>	<i>95</i>
Living Arrangement							
Alone	27,899	90.64	1.15	4.49	2.75	0.96	2,465
	<i>1,655</i>	<i>1.02</i>	<i>0.13</i>	<i>0.44</i>	<i>0.82</i>	<i>0.28</i>	<i>149</i>
With spouse	42,779	86.80	0.33	9.07	2.82	0.98	2,159
	<i>2,063</i>	<i>1.17</i>	<i>0.07</i>	<i>0.86</i>	<i>0.54</i>	<i>0.23</i>	<i>104</i>
With children	9,230	88.48	1.09	6.67	3.32	0.44	2,684
	<i>818</i>	<i>2.23</i>	<i>0.18</i>	<i>1.37</i>	<i>1.69</i>	<i>0.17</i>	<i>233</i>
With others	8,048	90.10	2.05	6.15	1.30	0.39	2,868
	<i>939</i>	<i>2.29</i>	<i>0.40</i>	<i>2.31</i>	<i>0.22</i>	<i>0.17</i>	<i>307</i>

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$87,977	88.50	0.83	7.10	2.71	0.86	\$2,354
	<i>3,234</i>	<i>0.75</i>	<i>0.07</i>	<i>0.59</i>	<i>0.31</i>	<i>0.14</i>	<i>88</i>
Race/Ethnicity							
White non-Hispanic	69,957	87.89	0.56	7.83	2.88	0.84	2,305
	<i>2,663</i>	<i>0.89</i>	<i>0.06</i>	<i>0.69</i>	<i>0.39</i>	<i>0.15</i>	<i>92</i>
Black non-Hispanic	9,865	90.46	2.21	4.40	2.06	0.87	2,999
	<i>1,001</i>	<i>1.39</i>	<i>0.41</i>	<i>1.29</i>	<i>0.28</i>	<i>0.42</i>	<i>294</i>
Hispanic	6,342	91.86	1.41	3.66	2.14	0.93	2,384
	<i>1,076</i>	<i>1.24</i>	<i>0.23</i>	<i>0.99</i>	<i>0.72</i>	<i>0.38</i>	<i>361</i>
Other	1,707	90.97	1.45	6.04	0.86	0.68	1,690
	<i>441</i>	<i>3.23</i>	<i>0.62</i>	<i>3.19</i>	<i>0.45</i>	<i>0.38</i>	<i>409</i>
Income							
Less than \$2,500	1,143	90.49	3.82	3.01	1.54	1.15	1,884
	<i>152</i>	<i>2.19</i>	<i>2.19</i>	<i>0.87</i>	<i>0.43</i>	<i>0.85</i>	<i>239</i>
\$2,500 - \$4,999	1,641	77.33	1.72	5.38	14.73	0.84	2,514
	<i>381</i>	<i>12.68</i>	<i>0.61</i>	<i>1.60</i>	<i>11.72</i>	<i>0.50</i>	<i>558</i>
\$5,000 - \$7,499	9,038	92.63	3.95	2.10	1.05	0.27	2,699
	<i>950</i>	<i>0.77</i>	<i>0.39</i>	<i>0.54</i>	<i>0.23</i>	<i>0.14</i>	<i>278</i>
\$7,500 - \$9,999	10,187	88.27	1.80	4.19	4.45	1.29	2,692
	<i>895</i>	<i>1.69</i>	<i>0.25</i>	<i>0.63</i>	<i>1.62</i>	<i>0.61</i>	<i>227</i>
\$10,000 - \$14,999	18,106	90.29	0.39	6.35	2.07	0.90	2,826
	<i>1,729</i>	<i>1.58</i>	<i>0.09</i>	<i>1.45</i>	<i>0.51</i>	<i>0.30</i>	<i>268</i>
\$15,000 - \$19,999	12,077	90.37	0.20	6.95	1.44	1.04	2,475
	<i>1,179</i>	<i>1.12</i>	<i>0.06</i>	<i>0.89</i>	<i>0.36</i>	<i>0.39</i>	<i>258</i>
\$20,000 - \$24,999	9,930	86.51	0.10	8.92	3.72	0.75	2,429
	<i>962</i>	<i>1.76</i>	<i>0.09</i>	<i>1.48</i>	<i>1.40</i>	<i>0.38</i>	<i>210</i>
\$25,000 - \$29,999	5,832	89.86	0.06	7.23	1.37	1.48	2,112
	<i>570</i>	<i>1.31</i>	<i>0.06</i>	<i>0.86</i>	<i>0.42</i>	<i>0.84</i>	<i>213</i>
\$30,000 or more	20,023	85.40	0.05	11.03	2.90	0.63	1,846
	<i>1,336</i>	<i>2.12</i>	<i>0.03</i>	<i>1.70</i>	<i>0.72</i>	<i>0.24</i>	<i>118</i>

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$87,977	88.50	0.83	7.10	2.71	0.86	\$2,354
	<i>3,234</i>	<i>0.75</i>	<i>0.07</i>	<i>0.59</i>	<i>0.31</i>	<i>0.14</i>	<i>88</i>
Health Status							
Excellent	6,099	90.62	0.23	7.10	1.70	0.34	1,120
	<i>761</i>	<i>3.49</i>	<i>0.07</i>	<i>3.40</i>	<i>0.57</i>	<i>0.23</i>	<i>132</i>
Very good	15,972	92.12	0.39	5.60	1.22	0.68	1,615
	<i>1,390</i>	<i>0.99</i>	<i>0.08</i>	<i>0.80</i>	<i>0.30</i>	<i>0.27</i>	<i>151</i>
Good	25,870	87.02	0.74	8.12	3.12	0.99	2,189
	<i>1,556</i>	<i>1.55</i>	<i>0.10</i>	<i>1.13</i>	<i>0.88</i>	<i>0.32</i>	<i>129</i>
Fair	21,960	87.69	0.85	6.71	3.48	1.27	3,198
	<i>1,586</i>	<i>1.19</i>	<i>0.12</i>	<i>0.72</i>	<i>0.69</i>	<i>0.31</i>	<i>214</i>
Poor	17,535	87.34	1.56	7.65	2.92	0.52	5,324
	<i>1,519</i>	<i>1.73</i>	<i>0.28</i>	<i>1.46</i>	<i>0.83</i>	<i>0.19</i>	<i>419</i>
Functional Limitation							
None	37,206	89.84	0.39	6.89	2.12	0.77	1,653
	<i>1,963</i>	<i>1.11</i>	<i>0.05</i>	<i>0.85</i>	<i>0.63</i>	<i>0.17</i>	<i>88</i>
IADL only ⁴	23,390	88.22	1.35	6.90	2.77	0.76	2,962
	<i>1,758</i>	<i>1.26</i>	<i>0.17</i>	<i>0.91</i>	<i>0.74</i>	<i>0.22</i>	<i>214</i>
One to two ADLs ⁵	15,768	85.76	0.87	7.92	4.27	1.17	3,397
	<i>1,183</i>	<i>2.05</i>	<i>0.20</i>	<i>1.11</i>	<i>1.37</i>	<i>0.48</i>	<i>248</i>
Three to five ADLs	11,335	88.28	1.13	7.19	2.40	0.99	4,881
	<i>1,095</i>	<i>1.83</i>	<i>0.19</i>	<i>1.72</i>	<i>0.50</i>	<i>0.43</i>	<i>425</i>

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$87,977	88.50	0.83	7.10	2.71	0.86	\$2,354
	<i>3,234</i>	<i>0.75</i>	<i>0.07</i>	<i>0.59</i>	<i>0.31</i>	<i>0.14</i>	<i>88</i>
Metropolitan Area Resident							
Yes	66,882	88.97	0.74	7.04	2.44	0.82	2,385
	<i>2,823</i>	<i>0.80</i>	<i>0.08</i>	<i>0.67</i>	<i>0.24</i>	<i>0.15</i>	<i>102</i>
No	21,095	86.99	1.12	7.30	3.58	1.01	2,278
	<i>1,441</i>	<i>1.90</i>	<i>0.12</i>	<i>1.28</i>	<i>1.10</i>	<i>0.32</i>	<i>159</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$29,620	59.25	4.06	22.13	11.20	3.36	\$792
	<i>1,250</i>	<i>1.53</i>	<i>0.63</i>	<i>0.68</i>	<i>1.33</i>	<i>0.40</i>	<i>34</i>
Medicare Status³							
Aged							
65 - 74 years	11,609	58.13	2.62	23.29	11.62	4.33	636
	<i>627</i>	<i>2.30</i>	<i>0.48</i>	<i>0.94</i>	<i>2.53</i>	<i>0.85</i>	<i>33</i>
75 - 84 years	9,213	61.47	1.80	25.08	9.21	2.45	823
	<i>541</i>	<i>1.51</i>	<i>0.26</i>	<i>0.75</i>	<i>1.45</i>	<i>0.47</i>	<i>48</i>
85 years and older	1,952	63.82	2.42	23.56	7.77	2.44	630
	<i>159</i>	<i>2.00</i>	<i>0.54</i>	<i>2.21</i>	<i>0.98</i>	<i>1.05</i>	<i>50</i>
Disabled							
Under 45 years	2,057	54.60	21.57	14.65	7.02	2.16	1,352
	<i>267</i>	<i>5.72</i>	<i>6.88</i>	<i>3.16</i>	<i>1.46</i>	<i>0.71</i>	<i>172</i>
45 - 64 years	4,790	57.81	5.09	16.28	17.16	3.66	1,449
	<i>790</i>	<i>5.54</i>	<i>1.37</i>	<i>3.35</i>	<i>3.80</i>	<i>1.17</i>	<i>236</i>
Gender							
Male	14,446	57.07	3.73	22.32	11.38	5.50	868
	<i>957</i>	<i>2.38</i>	<i>1.12</i>	<i>0.90</i>	<i>1.81</i>	<i>0.74</i>	<i>56</i>
Female	15,174	61.32	4.38	21.95	11.02	1.33	732
	<i>741</i>	<i>1.82</i>	<i>0.58</i>	<i>0.97</i>	<i>1.93</i>	<i>0.32</i>	<i>35</i>
Living Arrangement							
Alone	9,255	59.59	7.22	17.85	12.25	3.09	818
	<i>681</i>	<i>2.75</i>	<i>1.83</i>	<i>1.12</i>	<i>3.13</i>	<i>0.69</i>	<i>58</i>
With spouse	15,548	57.18	1.53	26.68	11.24	3.37	785
	<i>967</i>	<i>1.90</i>	<i>0.17</i>	<i>0.83</i>	<i>1.65</i>	<i>0.55</i>	<i>48</i>
With children	2,291	62.54	5.26	17.07	10.62	4.51	666
	<i>197</i>	<i>2.78</i>	<i>0.66</i>	<i>1.72</i>	<i>1.56</i>	<i>2.51</i>	<i>57</i>
With others	2,524	67.71	7.01	14.38	7.59	3.32	900
	<i>312</i>	<i>2.33</i>	<i>0.76</i>	<i>2.17</i>	<i>1.33</i>	<i>1.15</i>	<i>110</i>

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$29,620	59.25	4.06	22.13	11.20	3.36	\$792
	<i>1,250</i>	<i>1.53</i>	<i>0.63</i>	<i>0.68</i>	<i>1.33</i>	<i>0.40</i>	<i>34</i>
Race/Ethnicity							
White non-Hispanic	22,099	56.06	2.56	26.22	11.85	3.31	728
	<i>1,067</i>	<i>1.84</i>	<i>0.53</i>	<i>0.75</i>	<i>1.74</i>	<i>0.47</i>	<i>35</i>
Black non-Hispanic	4,408	70.44	6.52	9.89	10.03	3.12	1,340
	<i>446</i>	<i>1.41</i>	<i>0.76</i>	<i>1.26</i>	<i>1.21</i>	<i>0.66</i>	<i>131</i>
Hispanic	2,507	64.57	12.47	10.32	8.63	4.01	943
	<i>430</i>	<i>4.64</i>	<i>5.52</i>	<i>1.52</i>	<i>2.76</i>	<i>1.41</i>	<i>130</i>
Other	560	71.82	6.51	10.77	6.13	4.77	555
	<i>99</i>	<i>2.59</i>	<i>1.36</i>	<i>2.43</i>	<i>1.86</i>	<i>1.92</i>	<i>94</i>
Income							
Less than \$2,500	526	54.94	24.18	11.61	6.59	2.68	867
	<i>117</i>	<i>9.35</i>	<i>12.35</i>	<i>2.53</i>	<i>2.10</i>	<i>1.41</i>	<i>179</i>
\$2,500 - \$4,999	726	28.64	5.56	12.15	50.86	2.79	1,113
	<i>388</i>	<i>17.34</i>	<i>3.03</i>	<i>1.85</i>	<i>21.82</i>	<i>2.92</i>	<i>591</i>
\$5,000 - \$7,499	3,061	68.82	17.96	6.08	6.39	0.76	914
	<i>353</i>	<i>3.51</i>	<i>4.17</i>	<i>1.28</i>	<i>1.53</i>	<i>0.22</i>	<i>108</i>
\$7,500 - \$9,999	3,142	66.16	8.34	10.15	9.34	6.01	830
	<i>328</i>	<i>2.81</i>	<i>1.00</i>	<i>1.24</i>	<i>2.19</i>	<i>1.93</i>	<i>84</i>
\$10,000 - \$14,999	5,100	64.50	3.35	17.94	10.62	3.59	796
	<i>341</i>	<i>1.49</i>	<i>0.38</i>	<i>0.99</i>	<i>1.02</i>	<i>0.81</i>	<i>53</i>
\$15,000 - \$19,999	3,714	63.32	0.92	22.78	7.92	5.06	761
	<i>289</i>	<i>1.97</i>	<i>0.29</i>	<i>1.76</i>	<i>0.83</i>	<i>1.67</i>	<i>59</i>
\$20,000 - \$24,999	3,653	49.32	0.16	29.51	17.37	3.63	893
	<i>659</i>	<i>5.61</i>	<i>0.09</i>	<i>2.30</i>	<i>4.84</i>	<i>1.38</i>	<i>159</i>
\$25,000 - \$29,999	1,959	58.06	0.18	31.61	7.33	2.82	709
	<i>213</i>	<i>2.06</i>	<i>0.09</i>	<i>2.18</i>	<i>1.07</i>	<i>1.62</i>	<i>72</i>
\$30,000 or more	7,740	55.39	0.13	31.56	10.45	2.47	713
	<i>599</i>	<i>1.44</i>	<i>0.08</i>	<i>1.03</i>	<i>1.53</i>	<i>0.51</i>	<i>51</i>

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$29,620	59.25	4.06	22.13	11.20	3.36	\$792
	<i>1,250</i>	<i>1.53</i>	<i>0.63</i>	<i>0.68</i>	<i>1.33</i>	<i>0.40</i>	<i>34</i>
Health Status							
Excellent	2,372	63.49	1.27	21.01	8.94	5.29	435
	<i>194</i>	<i>2.23</i>	<i>0.31</i>	<i>2.03</i>	<i>1.14</i>	<i>2.33</i>	<i>32</i>
Very good	5,147	60.45	4.31	23.54	7.51	4.19	520
	<i>285</i>	<i>2.28</i>	<i>2.81</i>	<i>1.31</i>	<i>0.65</i>	<i>1.33</i>	<i>28</i>
Good	8,755	56.15	2.17	24.35	14.33	3.01	741
	<i>657</i>	<i>2.69</i>	<i>0.42</i>	<i>1.09</i>	<i>3.35</i>	<i>0.69</i>	<i>56</i>
Fair	7,066	63.29	5.67	18.79	8.27	3.98	1,029
	<i>486</i>	<i>1.04</i>	<i>0.80</i>	<i>1.17</i>	<i>0.90</i>	<i>0.72</i>	<i>70</i>
Poor	6,201	56.34	5.78	22.12	14.04	1.72	1,883
	<i>846</i>	<i>4.61</i>	<i>1.53</i>	<i>2.68</i>	<i>3.40</i>	<i>0.45</i>	<i>254</i>
Functional Limitation							
None	13,222	61.55	1.64	22.67	10.36	3.78	587
	<i>607</i>	<i>1.99</i>	<i>0.16</i>	<i>0.65</i>	<i>2.17</i>	<i>0.63</i>	<i>26</i>
IADL only ⁴	8,110	58.26	7.08	21.47	9.52	3.67	1,027
	<i>466</i>	<i>2.02</i>	<i>1.85</i>	<i>1.88</i>	<i>1.15</i>	<i>0.97</i>	<i>61</i>
One to two ADLs ⁵	5,007	58.24	5.33	20.81	13.32	2.29	1,079
	<i>486</i>	<i>1.84</i>	<i>1.68</i>	<i>1.79</i>	<i>2.25</i>	<i>0.53</i>	<i>99</i>
Three to five ADLs	3,263	53.91	4.35	23.60	15.55	2.59	1,405
	<i>658</i>	<i>7.34</i>	<i>0.98</i>	<i>3.51</i>	<i>5.45</i>	<i>1.00</i>	<i>283</i>

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$29,620	59.25	4.06	22.13	11.20	3.36	\$792
	<i>1,250</i>	<i>1.53</i>	<i>0.63</i>	<i>0.68</i>	<i>1.33</i>	<i>0.40</i>	<i>34</i>
Metropolitan Area Resident							
Yes	21,953	60.00	4.49	22.11	10.38	3.02	783
	<i>1,019</i>	<i>1.77</i>	<i>0.84</i>	<i>0.84</i>	<i>1.29</i>	<i>0.48</i>	<i>37</i>
No	7,667	57.10	2.84	22.19	13.52	4.35	828
	<i>718</i>	<i>3.17</i>	<i>0.26</i>	<i>1.07</i>	<i>3.55</i>	<i>0.64</i>	<i>76</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$78,242	65.62	3.09	14.09	15.65	1.55	\$2,093
	<i>1,491</i>	<i>0.78</i>	<i>0.83</i>	<i>0.41</i>	<i>0.50</i>	<i>0.25</i>	<i>40</i>
Medicare Status³							
Aged							
65 - 74 years	31,406	67.34	1.31	14.96	15.22	1.17	1,720
	<i>838</i>	<i>0.76</i>	<i>0.14</i>	<i>0.43</i>	<i>0.64</i>	<i>0.16</i>	<i>42</i>
75 - 84 years	27,508	69.37	0.82	13.87	15.10	0.85	2,457
	<i>788</i>	<i>0.88</i>	<i>0.08</i>	<i>0.43</i>	<i>0.79</i>	<i>0.15</i>	<i>62</i>
85 years and older	7,748	68.48	1.20	12.20	17.57	0.55	2,503
	<i>382</i>	<i>1.64</i>	<i>0.14</i>	<i>1.24</i>	<i>1.83</i>	<i>0.13</i>	<i>104</i>
Disabled							
Under 45 years	3,855	39.98	31.92	11.26	14.27	2.57	2,534
	<i>662</i>	<i>7.63</i>	<i>11.95</i>	<i>2.95</i>	<i>3.31</i>	<i>0.91</i>	<i>437</i>
45 - 64 years	7,726	55.22	5.90	14.66	18.12	6.10	2,337
	<i>573</i>	<i>2.16</i>	<i>1.56</i>	<i>2.14</i>	<i>1.56</i>	<i>2.20</i>	<i>160</i>
Gender							
Male	37,217	64.94	3.85	14.52	14.25	2.45	2,235
	<i>1,089</i>	<i>1.27</i>	<i>1.63</i>	<i>0.65</i>	<i>0.66</i>	<i>0.51</i>	<i>64</i>
Female	41,025	66.23	2.40	13.70	16.92	0.74	1,979
	<i>967</i>	<i>0.84</i>	<i>0.27</i>	<i>0.42</i>	<i>0.72</i>	<i>0.12</i>	<i>43</i>
Living Arrangement							
Alone	24,082	65.65	5.82	11.91	15.54	1.09	2,128
	<i>925</i>	<i>1.96</i>	<i>2.48</i>	<i>0.58</i>	<i>0.96</i>	<i>0.19</i>	<i>80</i>
With spouse	41,229	64.73	1.02	16.71	15.82	1.71	2,081
	<i>1,103</i>	<i>1.01</i>	<i>0.24</i>	<i>0.58</i>	<i>0.71</i>	<i>0.41</i>	<i>52</i>
With children	7,237	68.04	3.01	10.49	17.19	1.27	2,104
	<i>402</i>	<i>1.50</i>	<i>0.34</i>	<i>1.46</i>	<i>1.66</i>	<i>0.34</i>	<i>111</i>
With others	5,690	68.83	6.62	8.95	12.91	2.69	2,028
	<i>360</i>	<i>1.56</i>	<i>1.03</i>	<i>0.98</i>	<i>1.00</i>	<i>1.62</i>	<i>113</i>

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$78,242	65.62	3.09	14.09	15.65	1.55	\$2,093
	<i>1,491</i>	<i>0.78</i>	<i>0.83</i>	<i>0.41</i>	<i>0.50</i>	<i>0.25</i>	<i>40</i>
Race/Ethnicity							
White non-Hispanic	63,019	65.24	1.63	15.55	16.32	1.26	2,076
	<i>1,442</i>	<i>0.81</i>	<i>0.51</i>	<i>0.44</i>	<i>0.55</i>	<i>0.18</i>	<i>45</i>
Black non-Hispanic	7,525	69.25	5.37	7.79	13.47	4.11	2,288
	<i>563</i>	<i>2.14</i>	<i>1.35</i>	<i>0.94</i>	<i>0.92</i>	<i>1.98</i>	<i>161</i>
Hispanic	5,944	64.20	15.17	7.37	12.15	1.11	2,235
	<i>682</i>	<i>6.56</i>	<i>8.22</i>	<i>1.07</i>	<i>1.78</i>	<i>0.37</i>	<i>222</i>
Other	1,631	68.01	4.96	11.50	12.83	2.70	1,616
	<i>218</i>	<i>3.23</i>	<i>0.79</i>	<i>2.05</i>	<i>3.19</i>	<i>1.01</i>	<i>178</i>
Income							
Less than \$2,500	1,387	55.17	22.30	7.08	13.57	1.88	2,286
	<i>309</i>	<i>11.59</i>	<i>16.37</i>	<i>1.76</i>	<i>3.72</i>	<i>0.52</i>	<i>490</i>
\$2,500 - \$4,999	1,029	67.66	10.82	9.53	10.21	1.79	1,577
	<i>132</i>	<i>3.03</i>	<i>3.68</i>	<i>1.78</i>	<i>1.56</i>	<i>0.51</i>	<i>186</i>
\$5,000 - \$7,499	6,924	66.71	16.86	4.05	11.76	0.61	2,068
	<i>622</i>	<i>5.68</i>	<i>6.85</i>	<i>0.58</i>	<i>1.42</i>	<i>0.14</i>	<i>179</i>
\$7,500 - \$9,999	8,067	71.83	4.65	7.61	14.13	1.79	2,132
	<i>399</i>	<i>1.26</i>	<i>0.49</i>	<i>0.71</i>	<i>1.03</i>	<i>0.48</i>	<i>86</i>
\$10,000 - \$14,999	13,135	68.00	2.47	12.21	15.74	1.57	2,050
	<i>582</i>	<i>1.32</i>	<i>0.74</i>	<i>0.70</i>	<i>1.11</i>	<i>0.69</i>	<i>78</i>
\$15,000 - \$19,999	10,154	66.62	0.52	14.82	16.36	1.69	2,081
	<i>452</i>	<i>1.56</i>	<i>0.11</i>	<i>1.00</i>	<i>1.52</i>	<i>0.37</i>	<i>89</i>
\$20,000 - \$24,999	9,549	62.50	0.45	18.02	17.68	1.36	2,335
	<i>620</i>	<i>1.66</i>	<i>0.29</i>	<i>1.42</i>	<i>1.54</i>	<i>0.34</i>	<i>125</i>
\$25,000 - \$29,999	5,610	67.12	0.42	16.09	15.61	0.76	2,032
	<i>317</i>	<i>1.37</i>	<i>0.28</i>	<i>0.72</i>	<i>1.20</i>	<i>0.23</i>	<i>97</i>
\$30,000 or more	22,388	62.70	0.04	18.77	16.55	1.93	2,064
	<i>1,075</i>	<i>1.51</i>	<i>0.02</i>	<i>0.79</i>	<i>1.06</i>	<i>0.72</i>	<i>84</i>

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$78,242	65.62	3.09	14.09	15.65	1.55	\$2,093
	<i>1,491</i>	<i>0.78</i>	<i>0.83</i>	<i>0.41</i>	<i>0.50</i>	<i>0.25</i>	<i>40</i>
Health Status							
Excellent	6,914	66.69	0.49	13.14	16.48	3.21	1,269
	<i>322</i>	<i>1.36</i>	<i>0.07</i>	<i>0.71</i>	<i>0.80</i>	<i>1.43</i>	<i>50</i>
Very good	16,147	65.08	4.68	13.62	15.85	0.78	1,632
	<i>803</i>	<i>2.39</i>	<i>3.28</i>	<i>0.65</i>	<i>1.21</i>	<i>0.13</i>	<i>73</i>
Good	23,853	66.61	1.47	14.78	16.11	1.03	2,018
	<i>798</i>	<i>0.95</i>	<i>0.13</i>	<i>0.66</i>	<i>0.85</i>	<i>0.17</i>	<i>65</i>
Fair	18,216	66.94	3.17	13.04	14.32	2.53	2,653
	<i>706</i>	<i>1.00</i>	<i>0.60</i>	<i>0.71</i>	<i>0.71</i>	<i>0.87</i>	<i>95</i>
Poor	12,910	61.97	5.37	15.41	16.03	1.22	3,920
	<i>839</i>	<i>2.38</i>	<i>2.17</i>	<i>1.20</i>	<i>1.61</i>	<i>0.30</i>	<i>219</i>
Functional Limitation							
None	36,231	68.51	1.09	14.50	14.35	1.56	1,610
	<i>955</i>	<i>0.68</i>	<i>0.16</i>	<i>0.50</i>	<i>0.48</i>	<i>0.45</i>	<i>38</i>
IADL only ⁴	19,783	63.54	5.79	14.74	14.73	1.19	2,506
	<i>870</i>	<i>2.14</i>	<i>2.67</i>	<i>1.12</i>	<i>1.09</i>	<i>0.18</i>	<i>100</i>
One to two ADLs ⁵	13,039	63.87	4.86	13.43	16.16	1.67	2,809
	<i>593</i>	<i>1.89</i>	<i>2.22</i>	<i>0.71</i>	<i>0.89</i>	<i>0.39</i>	<i>117</i>
Three to five ADLs	9,121	61.03	2.61	12.08	22.16	2.12	3,928
	<i>626</i>	<i>2.48</i>	<i>0.33</i>	<i>1.11</i>	<i>2.55</i>	<i>1.05</i>	<i>217</i>

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$78,242	65.62	3.09	14.09	15.65	1.55	\$2,093
	<i>1,491</i>	<i>0.78</i>	<i>0.83</i>	<i>0.41</i>	<i>0.50</i>	<i>0.25</i>	<i>40</i>
Metropolitan Area Resident							
Yes	62,222	66.61	3.31	13.48	15.03	1.56	2,219
	<i>1,311</i>	<i>0.96</i>	<i>1.03</i>	<i>0.44</i>	<i>0.54</i>	<i>0.32</i>	<i>46</i>
No	16,018	61.76	2.24	16.45	18.06	1.50	1,730
	<i>652</i>	<i>1.03</i>	<i>0.30</i>	<i>0.96</i>	<i>1.22</i>	<i>0.17</i>	<i>72</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$8,955	1.38	0.96	16.83	78.25	2.58	\$240
	353	0.07	0.18	1.01	1.09	0.61	9
Medicare Status³							
Aged							
65 - 74 years	5,028	1.17	0.55	16.59	79.25	2.44	275
	271	0.09	0.20	1.31	1.52	1.02	14
75 - 84 years	2,594	1.75	0.80	16.89	79.30	1.26	232
	158	0.14	0.35	1.48	1.59	0.62	14
85 years and older	507	2.31	0.22	17.34	79.47	0.67	164
	59	0.31	0.17	3.97	3.97	0.50	18
Disabled							
Under 45 years	172	0.56	10.09	25.55	57.48	6.32	113
	25	0.14	3.24	5.18	4.75	1.60	17
45 - 64 years	654	1.01	2.94	15.78	70.88	9.38	198
	101	0.19	0.94	2.81	4.37	2.41	30
Gender							
Male	3,890	1.47	0.89	17.57	76.77	3.30	234
	215	0.11	0.22	1.54	1.65	0.65	13
Female	5,065	1.31	1.01	16.27	79.38	2.03	244
	247	0.09	0.27	1.12	1.27	0.96	12
Living Arrangement							
Alone	2,806	1.33	1.57	15.14	79.70	2.26	248
	187	0.10	0.42	1.63	1.86	0.76	16
With spouse	5,277	1.29	0.41	18.53	76.95	2.82	266
	257	0.09	0.15	1.37	1.52	0.99	13
With children	448	2.30	2.09	11.80	82.01	1.80	130
	52	0.34	0.67	3.61	3.83	0.96	15
With others	424	1.85	2.54	12.21	80.82	2.58	151
	63	0.30	0.63	2.81	3.54	1.26	22

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$8,955	1.38	0.96	16.83	78.25	2.58	\$240
	<i>353</i>	<i>0.07</i>	<i>0.18</i>	<i>1.01</i>	<i>1.09</i>	<i>0.61</i>	<i>9</i>
Race/Ethnicity							
White non-Hispanic	8,031	1.22	0.49	16.80	79.18	2.30	265
	<i>345</i>	<i>0.07</i>	<i>0.12</i>	<i>1.02</i>	<i>1.10</i>	<i>0.67</i>	<i>11</i>
Black non-Hispanic	367	3.07	2.40	20.28	69.39	4.86	112
	<i>60</i>	<i>0.61</i>	<i>0.92</i>	<i>9.21</i>	<i>7.98</i>	<i>1.88</i>	<i>18</i>
Hispanic	408	2.64	7.40	16.55	70.06	3.34	153
	<i>62</i>	<i>0.43</i>	<i>2.48</i>	<i>3.73</i>	<i>4.41</i>	<i>0.88</i>	<i>22</i>
Other	141	2.15	5.07	11.37	71.16	10.25	140
	<i>24</i>	<i>0.44</i>	<i>2.66</i>	<i>2.73</i>	<i>6.31</i>	<i>4.80</i>	<i>25</i>
Income							
Less than \$2,500	104	2.04	3.03	2.54	81.45	10.94	172
	<i>14</i>	<i>0.37</i>	<i>1.44</i>	<i>1.08</i>	<i>3.91</i>	<i>4.16</i>	<i>23</i>
\$2,500 - \$4,999	88	1.37	2.49	12.07	82.59	1.48	135
	<i>34</i>	<i>0.74</i>	<i>1.82</i>	<i>5.77</i>	<i>7.09</i>	<i>2.10</i>	<i>55</i>
\$5,000 - \$7,499	248	2.20	7.80	8.94	77.13	3.93	74
	<i>34</i>	<i>0.37</i>	<i>2.71</i>	<i>3.90</i>	<i>5.05</i>	<i>1.93</i>	<i>10</i>
\$7,500 - \$9,999	497	2.60	6.69	3.27	84.61	2.83	131
	<i>86</i>	<i>0.48</i>	<i>2.06</i>	<i>0.98</i>	<i>3.31</i>	<i>1.26</i>	<i>22</i>
\$10,000 - \$14,999	957	2.57	2.38	14.72	77.69	2.64	149
	<i>87</i>	<i>0.28</i>	<i>0.93</i>	<i>2.48</i>	<i>2.74</i>	<i>1.45</i>	<i>13</i>
\$15,000 - \$19,999	974	1.76	0.32	17.25	74.94	5.73	200
	<i>105</i>	<i>0.21</i>	<i>0.22</i>	<i>2.32</i>	<i>4.37</i>	<i>4.76</i>	<i>21</i>
\$20,000 - \$24,999	849	1.59	0.04	21.36	72.72	4.29	208
	<i>84</i>	<i>0.21</i>	<i>0.03</i>	<i>3.22</i>	<i>3.82</i>	<i>2.24</i>	<i>21</i>
\$25,000 - \$29,999	661	1.55	0.17	17.17	80.59	0.52	239
	<i>89</i>	<i>0.25</i>	<i>0.15</i>	<i>3.14</i>	<i>3.25</i>	<i>0.31</i>	<i>31</i>
\$30,000 or more	4,576	0.79	0.01	18.62	78.97	1.61	422
	<i>284</i>	<i>0.09</i>	<i>0.01</i>	<i>1.47</i>	<i>1.51</i>	<i>0.32</i>	<i>22</i>

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$8,955	1.38	0.96	16.83	78.25	2.58	\$240
	<i>353</i>	<i>0.07</i>	<i>0.18</i>	<i>1.01</i>	<i>1.09</i>	<i>0.61</i>	<i>9</i>
Health Status							
Excellent	1,709	1.19	0.33	20.14	74.37	3.97	314
	<i>170</i>	<i>0.13</i>	<i>0.17</i>	<i>2.90</i>	<i>3.38</i>	<i>2.83</i>	<i>28</i>
Very good	2,624	1.34	0.44	14.29	82.03	1.89	265
	<i>187</i>	<i>0.12</i>	<i>0.21</i>	<i>1.45</i>	<i>1.66</i>	<i>0.73</i>	<i>18</i>
Good	2,605	1.50	0.82	17.28	79.00	1.41	220
	<i>137</i>	<i>0.09</i>	<i>0.24</i>	<i>1.42</i>	<i>1.46</i>	<i>0.31</i>	<i>11</i>
Fair	1,435	1.36	2.44	16.43	75.50	4.27	209
	<i>135</i>	<i>0.15</i>	<i>0.75</i>	<i>1.99</i>	<i>2.56</i>	<i>1.45</i>	<i>20</i>
Poor	577	1.59	2.16	17.54	75.99	2.72	175
	<i>110</i>	<i>0.58</i>	<i>0.90</i>	<i>4.08</i>	<i>4.59</i>	<i>0.74</i>	<i>32</i>
Functional Limitation							
None	6,203	1.29	0.47	16.69	79.39	2.15	276
	<i>294</i>	<i>0.08</i>	<i>0.14</i>	<i>1.24</i>	<i>1.37</i>	<i>0.84</i>	<i>13</i>
IADL only ⁴	1,446	1.49	2.55	16.28	76.19	3.49	183
	<i>106</i>	<i>0.15</i>	<i>0.74</i>	<i>1.91</i>	<i>2.27</i>	<i>0.96</i>	<i>13</i>
One to two ADLs ⁵	909	1.75	1.41	19.11	75.30	2.43	196
	<i>102</i>	<i>0.35</i>	<i>0.56</i>	<i>2.87</i>	<i>3.05</i>	<i>1.50</i>	<i>21</i>
Three to five ADLs	397	1.51	1.82	15.81	74.58	6.29	171
	<i>99</i>	<i>0.42</i>	<i>1.00</i>	<i>3.46</i>	<i>4.22</i>	<i>1.61</i>	<i>40</i>

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$8,955	1.38	0.96	16.83	78.25	2.58	\$240
	<i>353</i>	<i>0.07</i>	<i>0.18</i>	<i>1.01</i>	<i>1.09</i>	<i>0.61</i>	<i>9</i>
Metropolitan Area Resident							
Yes	7,407	1.59	0.93	17.83	77.08	2.56	264
	<i>282</i>	<i>0.08</i>	<i>0.20</i>	<i>1.18</i>	<i>1.27</i>	<i>0.74</i>	<i>10</i>
No	1,547	0.36	1.08	12.05	83.85	2.66	167
	<i>208</i>	<i>0.07</i>	<i>0.33</i>	<i>1.30</i>	<i>1.66</i>	<i>0.73</i>	<i>23</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$32,508	4.60	11.89	33.90	41.99	7.63	\$870
	<i>488</i>	<i>0.15</i>	<i>0.82</i>	<i>0.66</i>	<i>0.58</i>	<i>0.51</i>	<i>13</i>
Medicare Status³							
Aged							
65 - 74 years	14,493	4.88	8.78	37.78	41.43	7.13	794
	<i>406</i>	<i>0.24</i>	<i>1.23</i>	<i>1.02</i>	<i>0.77</i>	<i>0.69</i>	<i>20</i>
75 - 84 years	9,741	5.51	7.17	34.11	47.20	6.01	870
	<i>218</i>	<i>0.25</i>	<i>0.98</i>	<i>1.04</i>	<i>1.17</i>	<i>0.57</i>	<i>17</i>
85 years and older	2,414	6.04	8.87	26.81	51.81	6.47	780
	<i>105</i>	<i>0.44</i>	<i>1.21</i>	<i>1.63</i>	<i>1.42</i>	<i>1.01</i>	<i>25</i>
Disabled							
Under 45 years	1,665	0.79	44.69	16.19	24.65	13.68	1,095
	<i>107</i>	<i>0.14</i>	<i>3.89</i>	<i>2.09</i>	<i>2.01</i>	<i>2.74</i>	<i>64</i>
45 - 64 years	4,195	2.21	22.28	31.09	33.03	11.38	1,269
	<i>235</i>	<i>0.29</i>	<i>2.43</i>	<i>2.29</i>	<i>1.58</i>	<i>1.58</i>	<i>59</i>
Gender							
Male	13,440	5.27	8.85	35.35	39.31	11.22	807
	<i>330</i>	<i>0.23</i>	<i>0.84</i>	<i>1.03</i>	<i>0.72</i>	<i>0.84</i>	<i>18</i>
Female	19,068	4.13	14.03	32.87	43.88	5.10	920
	<i>360</i>	<i>0.18</i>	<i>1.23</i>	<i>0.88</i>	<i>0.83</i>	<i>0.52</i>	<i>17</i>
Living Arrangement							
Alone	9,731	4.69	17.50	27.78	42.43	7.60	860
	<i>281</i>	<i>0.23</i>	<i>1.94</i>	<i>1.07</i>	<i>1.30</i>	<i>0.65</i>	<i>25</i>
With spouse	17,352	4.66	4.01	41.45	42.31	7.56	876
	<i>356</i>	<i>0.21</i>	<i>0.47</i>	<i>0.85</i>	<i>0.64</i>	<i>0.68</i>	<i>17</i>
With children	2,964	4.38	22.66	22.50	43.48	6.99	862
	<i>138</i>	<i>0.37</i>	<i>1.94</i>	<i>1.70</i>	<i>1.38</i>	<i>1.04</i>	<i>33</i>
With others	2,461	4.07	32.21	18.51	36.16	9.05	877
	<i>155</i>	<i>0.40</i>	<i>3.24</i>	<i>1.93</i>	<i>2.06</i>	<i>2.10</i>	<i>52</i>

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$32,508	4.60	11.89	33.90	41.99	7.63	\$870
	<i>488</i>	<i>0.15</i>	<i>0.82</i>	<i>0.66</i>	<i>0.58</i>	<i>0.51</i>	<i>13</i>
Race/Ethnicity							
White non-Hispanic	26,859	4.40	8.11	36.90	43.41	7.19	885
	<i>464</i>	<i>0.17</i>	<i>0.86</i>	<i>0.70</i>	<i>0.68</i>	<i>0.52</i>	<i>15</i>
Black non-Hispanic	2,695	5.29	27.34	24.58	34.23	8.56	819
	<i>164</i>	<i>0.56</i>	<i>3.57</i>	<i>2.39</i>	<i>2.21</i>	<i>1.36</i>	<i>49</i>
Hispanic	2,116	6.23	34.18	14.29	36.85	8.44	796
	<i>136</i>	<i>0.65</i>	<i>3.43</i>	<i>1.55</i>	<i>2.30</i>	<i>2.00</i>	<i>40</i>
Other	784	4.86	26.12	17.29	34.34	17.39	776
	<i>91</i>	<i>0.82</i>	<i>4.41</i>	<i>3.39</i>	<i>3.63</i>	<i>4.75</i>	<i>72</i>
Income							
Less than \$2,500	487	5.74	14.62	24.24	40.15	15.25	803
	<i>62</i>	<i>0.88</i>	<i>3.63</i>	<i>3.74</i>	<i>3.74</i>	<i>3.17</i>	<i>72</i>
\$2,500 - \$4,999	463	2.90	40.10	10.88	35.82	10.30	710
	<i>55</i>	<i>0.75</i>	<i>4.83</i>	<i>3.06</i>	<i>3.67</i>	<i>3.19</i>	<i>82</i>
\$5,000 - \$7,499	3,080	2.30	60.50	6.43	26.46	4.29	920
	<i>242</i>	<i>0.32</i>	<i>3.31</i>	<i>1.01</i>	<i>2.24</i>	<i>0.83</i>	<i>67</i>
\$7,500 - \$9,999	3,287	4.92	30.28	12.84	41.07	10.89	869
	<i>129</i>	<i>0.42</i>	<i>2.48</i>	<i>1.18</i>	<i>1.51</i>	<i>1.52</i>	<i>32</i>
\$10,000 - \$14,999	5,246	5.90	9.72	27.91	45.68	10.79	819
	<i>224</i>	<i>0.40</i>	<i>1.82</i>	<i>1.76</i>	<i>1.36</i>	<i>1.45</i>	<i>30</i>
\$15,000 - \$19,999	3,965	5.32	4.17	33.59	48.80	8.12	812
	<i>147</i>	<i>0.35</i>	<i>0.91</i>	<i>1.43</i>	<i>1.43</i>	<i>1.09</i>	<i>23</i>
\$20,000 - \$24,999	3,897	4.16	0.98	45.07	43.33	6.46	953
	<i>208</i>	<i>0.35</i>	<i>0.44</i>	<i>2.00</i>	<i>1.55</i>	<i>1.22</i>	<i>39</i>
\$25,000 - \$29,999	2,562	4.72	0.66	47.53	40.14	6.94	928
	<i>164</i>	<i>0.49</i>	<i>0.24</i>	<i>2.31</i>	<i>1.78</i>	<i>1.50</i>	<i>50</i>
\$30,000 or more	9,522	4.38	0.19	46.85	42.80	5.78	878
	<i>279</i>	<i>0.28</i>	<i>0.07</i>	<i>1.08</i>	<i>0.82</i>	<i>0.78</i>	<i>20</i>

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$32,508	4.60	11.89	33.90	41.99	7.63	\$870
	488	0.15	0.82	0.66	0.58	0.51	13
Health Status							
Excellent	2,588	9.34	4.89	36.23	43.61	5.93	475
	129	0.68	0.77	1.58	1.42	1.05	17
Very good	6,496	6.72	5.23	38.68	44.30	5.08	657
	225	0.37	0.65	1.34	1.11	0.65	19
Good	10,604	4.54	9.58	35.63	42.59	7.65	897
	287	0.24	0.73	1.08	0.94	0.75	21
Fair	7,845	3.32	16.54	28.93	41.69	9.52	1,143
	324	0.21	2.07	1.44	1.21	0.97	38
Poor	4,889	1.46	22.10	30.16	37.38	8.90	1,484
	274	0.17	2.64	2.08	1.61	1.16	59
Functional Limitation							
None	15,626	6.33	6.96	36.56	43.26	6.89	694
	291	0.22	0.45	0.83	0.68	0.63	13
IADL only ⁴	8,537	3.17	16.34	31.48	40.81	8.21	1,081
	380	0.29	2.01	1.39	1.33	0.92	40
One to two ADLs ⁵	5,271	3.03	13.39	33.65	42.01	7.92	1,136
	221	0.23	1.88	1.43	1.36	1.15	35
Three to five ADLs	3,068	2.46	21.91	27.57	38.76	9.30	1,321
	174	0.28	3.19	2.53	1.66	1.76	60

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$32,508	4.60	11.89	33.90	41.99	7.63	\$870
	<i>488</i>	<i>0.15</i>	<i>0.82</i>	<i>0.66</i>	<i>0.58</i>	<i>0.51</i>	<i>13</i>
Metropolitan Area Resident							
Yes	24,257	5.86	11.22	35.46	39.95	7.51	865
	<i>431</i>	<i>0.22</i>	<i>0.80</i>	<i>0.79</i>	<i>0.55</i>	<i>0.54</i>	<i>14</i>
No	8,243	0.90	13.86	29.28	47.99	7.97	890
	<i>265</i>	<i>0.20</i>	<i>2.07</i>	<i>1.08</i>	<i>1.74</i>	<i>1.00</i>	<i>31</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Long-Term Care Facility Residents¹

1 of 3

Beneficiary Characteristic ²	Total Expenditures (millions of \$) ³	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$81,399	10.20	44.13	1.49	36.38	7.81	\$30,398
	<i>3,683</i>	<i>2.19</i>	<i>1.75</i>	<i>0.22</i>	<i>1.70</i>	<i>1.05</i>	<i>1,044</i>
Medicare Status⁴							
Aged							
65 - 74 years	9,274	8.86	47.18	1.33	38.96	3.67	30,151
	<i>1,153</i>	<i>2.35</i>	<i>4.29</i>	<i>0.54</i>	<i>4.54</i>	<i>1.22</i>	<i>1,556</i>
75 - 84 years	22,248	9.92	42.84	1.76	38.68	6.79	26,834
	<i>1,229</i>	<i>1.12</i>	<i>2.61</i>	<i>0.36</i>	<i>2.15</i>	<i>1.18</i>	<i>951</i>
85 years and older	34,677	8.21	40.31	1.91	45.92	3.65	28,294
	<i>1,576</i>	<i>0.79</i>	<i>1.56</i>	<i>0.39</i>	<i>1.55</i>	<i>0.59</i>	<i>810</i>
Disabled							
Under 45 years	5,981	3.49	59.21	0.00	10.02	27.28	48,971
	<i>1,040</i>	<i>1.78</i>	<i>5.87</i>	<i>0.00</i>	<i>3.21</i>	<i>6.41</i>	<i>8,588</i>
45 - 64 years	9,219	24.04	48.75	0.37	9.42	17.42	47,684
	<i>2,594</i>	<i>15.54</i>	<i>10.66</i>	<i>0.37</i>	<i>3.01</i>	<i>7.72</i>	<i>10,826</i>
Gender							
Male	26,899	14.52	43.78	0.98	28.47	12.25	32,023
	<i>2,851</i>	<i>6.07</i>	<i>4.01</i>	<i>0.24</i>	<i>3.17</i>	<i>2.62</i>	<i>2,642</i>
Female	54,500	8.06	44.30	1.74	40.28	5.62	29,655
	<i>2,160</i>	<i>0.68</i>	<i>1.62</i>	<i>0.33</i>	<i>1.46</i>	<i>0.97</i>	<i>763</i>
Race/Ethnicity							
White non-Hispanic	68,564	10.14	41.25	1.56	39.15	7.89	30,490
	<i>3,544</i>	<i>2.52</i>	<i>1.83</i>	<i>0.23</i>	<i>2.02</i>	<i>1.20</i>	<i>1,236</i>
Black non-Hispanic	8,445	10.64	62.06	1.27	20.29	5.75	30,145
	<i>846</i>	<i>1.83</i>	<i>3.99</i>	<i>0.70</i>	<i>3.00</i>	<i>2.22</i>	<i>2,006</i>
Hispanic	1,929	10.89	60.80	0.67	15.27	12.37	29,384
	<i>465</i>	<i>5.62</i>	<i>9.17</i>	<i>0.68</i>	<i>5.56</i>	<i>4.33</i>	<i>5,129</i>
Other	1,228	11.47	53.63	0.00	25.92	8.98	27,201
	<i>333</i>	<i>5.75</i>	<i>9.71</i>	<i>0.00</i>	<i>7.52</i>	<i>5.62</i>	<i>3,906</i>

Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Long-Term Care Facility Residents¹

2 of 3

Beneficiary Characteristic ²	Total Expenditures (millions of \$) ³	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$81,399	10.20	44.13	1.49	36.38	7.81	\$30,398
	<i>3,683</i>	<i>2.19</i>	<i>1.75</i>	<i>0.22</i>	<i>1.70</i>	<i>1.05</i>	<i>1,044</i>
Income							
Less than \$2,500	3,194	5.23	51.58	0.24	21.03	21.92	35,835
	<i>709</i>	<i>2.50</i>	<i>5.14</i>	<i>0.19</i>	<i>8.76</i>	<i>9.72</i>	<i>8,767</i>
\$2,500 - \$4,999	7,799	4.53	69.30	0.51	20.27	5.39	35,240
	<i>899</i>	<i>1.63</i>	<i>2.93</i>	<i>0.41</i>	<i>2.36</i>	<i>1.92</i>	<i>2,418</i>
\$5,000 - \$7,499	17,286	7.09	56.73	0.55	24.66	10.96	30,172
	<i>1,219</i>	<i>0.99</i>	<i>3.28</i>	<i>0.23</i>	<i>2.07</i>	<i>3.81</i>	<i>1,419</i>
\$7,500 - \$9,999	19,066	17.62	46.95	0.80	26.14	8.49	34,667
	<i>2,518</i>	<i>8.06</i>	<i>4.73</i>	<i>0.30</i>	<i>3.81</i>	<i>2.17</i>	<i>4,116</i>
\$10,000 - \$14,999	12,550	9.72	38.77	3.63	44.48	3.40	26,571
	<i>1,128</i>	<i>1.37</i>	<i>3.37</i>	<i>0.88</i>	<i>3.23</i>	<i>1.19</i>	<i>1,264</i>
\$15,000 - \$19,999	6,521	8.36	36.36	1.58	44.83	8.87	28,503
	<i>852</i>	<i>2.03</i>	<i>4.35</i>	<i>0.49</i>	<i>4.50</i>	<i>2.72</i>	<i>1,845</i>
\$20,000 - \$24,999	4,914	9.69	26.27	2.11	57.88	4.05	28,594
	<i>818</i>	<i>3.13</i>	<i>5.89</i>	<i>0.75</i>	<i>7.07</i>	<i>1.63</i>	<i>2,785</i>
\$25,000 - \$29,999	2,651	3.94	19.16	0.53	73.93	2.45	27,152
	<i>501</i>	<i>1.00</i>	<i>6.26</i>	<i>0.23</i>	<i>6.74</i>	<i>1.57</i>	<i>3,419</i>
\$30,000 or more	7,417	11.44	14.51	3.22	64.72	6.10	27,089
	<i>814</i>	<i>2.75</i>	<i>2.87</i>	<i>0.87</i>	<i>4.42</i>	<i>2.02</i>	<i>1,476</i>
Health Status							
Excellent	1,571	2.00	45.77	0.36	41.59	10.28	25,696
	<i>390</i>	<i>1.21</i>	<i>12.92</i>	<i>0.42</i>	<i>10.75</i>	<i>4.72</i>	<i>5,578</i>
Very good	6,694	2.12	44.50	0.08	27.15	26.14	36,762
	<i>1,258</i>	<i>0.94</i>	<i>7.26</i>	<i>0.06</i>	<i>7.46</i>	<i>8.09</i>	<i>6,209</i>
Good	22,967	5.51	46.20	1.72	37.30	9.27	30,481
	<i>1,730</i>	<i>0.90</i>	<i>3.39</i>	<i>0.38</i>	<i>3.03</i>	<i>1.91</i>	<i>1,186</i>
Fair	33,357	8.72	45.14	1.47	39.37	5.30	30,515
	<i>1,568</i>	<i>0.94</i>	<i>1.77</i>	<i>0.31</i>	<i>1.89</i>	<i>1.25</i>	<i>900</i>
Poor	15,310	24.53	39.08	1.72	31.98	2.68	29,258
	<i>2,489</i>	<i>8.87</i>	<i>4.17</i>	<i>0.73</i>	<i>5.18</i>	<i>0.88</i>	<i>4,093</i>

Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Long-Term Care Facility Residents¹

3 of 3

Beneficiary Characteristic ²	Total Expenditures (millions of \$) ³	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$81,399	10.20	44.13	1.49	36.38	7.81	\$30,398
	<i>3,683</i>	<i>2.19</i>	<i>1.75</i>	<i>0.22</i>	<i>1.70</i>	<i>1.05</i>	<i>1,044</i>
Functional Limitation							
None	1,442	14.27	23.11	1.60	33.46	27.56	15,436
	<i>302</i>	<i>5.46</i>	<i>9.50</i>	<i>1.02</i>	<i>8.78</i>	<i>9.52</i>	<i>2,258</i>
IADL only ⁵	5,496	8.88	19.30	1.09	27.16	43.57	23,358
	<i>900</i>	<i>2.53</i>	<i>4.93</i>	<i>0.47</i>	<i>5.52</i>	<i>8.66</i>	<i>3,180</i>
One to two ADLs ⁶	18,731	16.68	40.40	1.58	32.45	8.90	29,769
	<i>2,506</i>	<i>8.49</i>	<i>4.50</i>	<i>0.43</i>	<i>4.49</i>	<i>2.11</i>	<i>3,406</i>
Three to five ADLs	55,708	8.04	48.40	1.50	38.67	3.40	32,581
	<i>2,410</i>	<i>0.71</i>	<i>1.59</i>	<i>0.29</i>	<i>1.63</i>	<i>0.77</i>	<i>961</i>
Metropolitan Area Resident							
Yes	63,152	11.29	44.19	1.62	35.40	7.51	32,699
	<i>3,439</i>	<i>2.78</i>	<i>2.20</i>	<i>0.29</i>	<i>2.12</i>	<i>1.03</i>	<i>1,352</i>
No	18,247	6.41	43.94	1.05	39.75	8.85	24,446
	<i>1,395</i>	<i>0.66</i>	<i>1.86</i>	<i>0.25</i>	<i>1.85</i>	<i>2.94</i>	<i>1,155</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *long-term care facility residents* includes beneficiaries who resided only in a long-term care facility during the year, and beneficiaries who resided part of the year in a long-term care facility and part of the year in the community. It excludes beneficiaries who resided only in the community during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year, and facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year. However, in contrast with Table 4.1, facility expenditures in Table 4.7 do not include expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year community residents, which were reported during a community interview or created through Medicare claims data. See Appendix B for additional information.
- 4 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 5 *IADL* stands for Instrumental Activity of Daily Living.
- 6 *ADL* stands for Activity of Daily Living.

Table 4.8 Personal Health Care Expenditures Per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$6,882	\$4,975	\$8,875	\$7,344	\$6,596	\$6,915
	138	365	404	311	205	557
Medicare Status³						
Aged						
65 - 74 years	5,601	3,285	7,769	6,184	5,258	6,005
	149	431	596	445	229	757
75 - 84 years	7,776	5,295	9,182	8,336	7,796	7,130
	230	674	919	537	392	891
85 years and older	8,783	8,078	9,569	8,611	8,847	11,713
	346	1,444	917	721	797	1,590
Disabled						
Under 45 years	7,908	5,262	8,719	6,838	8,725	9,262
	784	850	1,222	1,887	1,375	5,713
45 - 64 years	8,680	6,492	10,462	8,215	9,000	5,861
	621	996	1,191	1,778	1,147	1,516
Gender						
Male	7,233	5,563	8,907	7,934	7,141	7,700
	191	505	766	472	338	881
Female	6,601	4,229	8,855	6,970	6,087	6,302
	160	444	507	372	218	646
Living Arrangement						
Alone	7,175	5,254	9,434	6,941	6,841	7,205
	250	530	793	470	406	1,050
With spouse	6,511	5,258	8,612	7,098	6,296	6,281
	169	647	833	406	234	513
With children	7,396	4,556	8,455	7,908	8,370	11,155
	393	731	850	828	1,034	3,339
With others	7,684	3,920	8,391	11,807	7,779	9,770
	493	618	817	2,203	1,143	2,734

Table 4.8 Personal Health Care Expenditures Per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$6,882	\$4,975	\$8,875	\$7,344	\$6,596	\$6,915
	<i>138</i>	<i>365</i>	<i>404</i>	<i>311</i>	<i>205</i>	<i>557</i>
Race/Ethnicity						
White non-Hispanic	6,760	4,570	9,166	7,381	6,460	6,776
	<i>147</i>	<i>386</i>	<i>560</i>	<i>310</i>	<i>226</i>	<i>547</i>
Black non-Hispanic	8,451	6,891	9,956	7,193	9,017	13,045
	<i>520</i>	<i>1,297</i>	<i>867</i>	<i>1,341</i>	<i>1,323</i>	<i>5,277</i>
Hispanic	7,001	4,588	8,699	6,520	5,896	4,893
	<i>592</i>	<i>1,054</i>	<i>1,151</i>	<i>1,454</i>	<i>1,117</i>	<i>2,127</i>
Other	5,198	4,256	4,240	7,757	6,569	1,393
	<i>656</i>	<i>1,254</i>	<i>594</i>	<i>3,777</i>	<i>2,022</i>	<i>1,377</i>
Income						
Less than \$2,500	6,561	3,453	10,046	6,607	4,674	6,068
	<i>771</i>	<i>617</i>	<i>2,664</i>	<i>1,324</i>	<i>1,394</i>	<i>2,190</i>
\$2,500 - \$4,999	6,680	2,860	5,872	14,924	6,052	2,470
	<i>1,182</i>	<i>563</i>	<i>768</i>	<i>6,308</i>	<i>3,242</i>	<i>538</i>
\$5,000 - \$7,499	7,437	2,330	8,662	7,402	6,776	10,946
	<i>481</i>	<i>366</i>	<i>718</i>	<i>1,114</i>	<i>1,491</i>	<i>3,702</i>
\$7,500 - \$9,999	7,634	4,861	9,433	8,309	6,640	14,162
	<i>389</i>	<i>668</i>	<i>831</i>	<i>737</i>	<i>1,066</i>	<i>8,659</i>
\$10,000 - \$14,999	7,176	4,775	8,525	8,277	6,769	8,778
	<i>372</i>	<i>777</i>	<i>985</i>	<i>899</i>	<i>531</i>	<i>2,660</i>
\$15,000 - \$19,999	6,903	5,523	9,380	7,907	6,642	7,540
	<i>375</i>	<i>806</i>	<i>1,800</i>	<i>897</i>	<i>527</i>	<i>1,476</i>
\$20,000 - \$24,999	7,407	7,191	14,817	6,705	8,340	5,406
	<i>436</i>	<i>1,638</i>	<i>7,504</i>	<i>656</i>	<i>858</i>	<i>989</i>
\$25,000 - \$29,999	6,476	6,352	5,680	6,361	6,395	8,111
	<i>336</i>	<i>1,849</i>	<i>2,055</i>	<i>748</i>	<i>538</i>	<i>1,899</i>
\$30,000 or more	6,202	7,332	14,066	6,441	6,033	6,165
	<i>223</i>	<i>2,072</i>	<i>6,551</i>	<i>453</i>	<i>312</i>	<i>626</i>

Table 4.8 Personal Health Care Expenditures Per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$6,882	\$4,975	\$8,875	\$7,344	\$6,596	\$6,915
	<i>138</i>	<i>365</i>	<i>404</i>	<i>311</i>	<i>205</i>	<i>557</i>
Health Status						
Excellent	3,836	2,464	3,992	3,402	3,419	4,171
	<i>201</i>	<i>576</i>	<i>621</i>	<i>464</i>	<i>338</i>	<i>1,004</i>
Very good	4,959	3,321	6,213	5,167	4,350	5,054
	<i>221</i>	<i>596</i>	<i>1,147</i>	<i>477</i>	<i>255</i>	<i>680</i>
Good	6,470	3,875	6,467	6,918	6,772	7,123
	<i>213</i>	<i>473</i>	<i>480</i>	<i>478</i>	<i>350</i>	<i>836</i>
Fair	9,055	6,772	8,893	11,575	9,041	12,169
	<i>343</i>	<i>1,019</i>	<i>703</i>	<i>965</i>	<i>602</i>	<i>1,571</i>
Poor	14,440	8,402	16,278	17,074	16,457	11,584
	<i>749</i>	<i>1,460</i>	<i>1,450</i>	<i>1,745</i>	<i>1,609</i>	<i>2,509</i>
Functional Limitation						
None	4,995	3,775	5,486	5,144	4,642	5,185
	<i>127</i>	<i>493</i>	<i>400</i>	<i>272</i>	<i>178</i>	<i>527</i>
IADL only ⁴	8,196	5,523	9,169	9,128	8,250	7,383
	<i>316</i>	<i>586</i>	<i>808</i>	<i>811</i>	<i>456</i>	<i>955</i>
One to two ADLs ⁵	9,544	5,846	10,601	11,187	10,250	9,472
	<i>404</i>	<i>802</i>	<i>1,161</i>	<i>836</i>	<i>769</i>	<i>1,375</i>
Three to five ADLs	15,205	9,961	15,687	16,894	17,957	22,637
	<i>795</i>	<i>1,990</i>	<i>1,522</i>	<i>1,652</i>	<i>2,078</i>	<i>5,567</i>

Table 4.8 Personal Health Care Expenditures Per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$6,882	\$4,975	\$8,875	\$7,344	\$6,596	\$6,915
	<i>138</i>	<i>365</i>	<i>404</i>	<i>311</i>	<i>205</i>	<i>557</i>
Metropolitan Area Resident						
Yes	7,084	5,656	9,317	7,804	6,681	7,322
	<i>151</i>	<i>494</i>	<i>513</i>	<i>414</i>	<i>235</i>	<i>664</i>
No	6,323	3,882	7,772	6,619	6,345	5,752
	<i>293</i>	<i>468</i>	<i>598</i>	<i>449</i>	<i>320</i>	<i>981</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,286	\$11,623	\$13,318	\$13,094	\$11,966	\$13,982
	372	982	819	752	544	1,877
Medicare Status³						
Aged						
65 - 74 years	11,636	10,172	13,874	14,721	12,901	16,020
	620	1,655	1,282	1,533	949	3,818
75 - 84 years	10,696	10,040	11,376	13,322	11,031	13,671
	571	1,761	2,058	1,168	732	2,710
85 years and older	9,364	13,603	9,398	9,304	10,817	11,630
	518	3,365	986	805	1,201	2,064
Disabled						
Under 45 years	14,093	10,021	14,665	4,600	17,225	34,928
	1,806	2,245	2,572	731	3,655	0
45 - 64 years	13,658	14,298	16,697	12,412	11,452	3,059
	1,445	2,155	2,765	4,295	1,326	448
Gender						
Male	12,321	12,427	13,337	15,678	13,083	15,325
	510	1,161	1,481	1,289	903	2,613
Female	10,380	10,281	13,307	11,377	10,681	12,613
	431	1,478	1,112	786	556	2,766
Living Arrangement						
Alone	11,260	13,304	13,770	11,488	11,296	15,484
	655	2,242	1,548	1,080	1,134	3,771
With spouse	11,370	11,528	12,438	13,891	12,302	13,326
	444	1,337	2,260	1,108	714	2,256
With children	10,024	7,559	13,535	10,068	12,245	15,065
	732	1,794	1,643	1,127	1,182	7,606
With others	12,718	14,160	12,949	20,122	10,697	9,682
	1,256	2,218	1,507	5,258	1,587	3,708

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$11,286	\$11,623	\$13,318	\$13,094	\$11,966	\$13,982
	372	982	819	752	544	1,877
Race/Ethnicity						
White non-Hispanic	11,037	11,518	13,321	13,046	11,407	13,821
	345	1,324	1,148	765	478	1,967
Black non-Hispanic	13,159	12,821	14,617	9,366	16,939	15,265
	1,171	2,438	1,654	1,809	3,923	3,867
Hispanic	11,927	10,471	12,778	13,404	15,646	12,341
	1,584	2,874	2,681	4,185	4,646	0
Other	10,706	10,211	7,368	23,154	14,354	0
	2,758	4,171	1,695	11,775	7,157	0
Income						
Less than \$2,500	8,916	6,706	13,774	8,636	6,106	0
	1,371	2,231	3,342	2,229	1,219	0
\$2,500 - \$4,999	11,535	5,360	7,356	21,164	26,651	0
	2,440	1,774	1,723	7,530	14,710	0
\$5,000 - \$7,499	12,497	6,901	13,804	12,941	9,299	13,192
	1,089	1,750	1,427	2,136	2,245	4,912
\$7,500 - \$9,999	10,688	10,800	13,041	11,489	13,913	10,746
	817	1,735	1,537	1,177	3,836	1,333
\$10,000 - \$14,999	12,802	16,039	12,577	14,449	12,434	29,307
	1,156	3,293	2,450	2,291	1,505	7,937
\$15,000 - \$19,999	12,159	11,962	13,645	15,581	13,814	12,466
	1,133	2,538	3,918	3,067	1,527	3,494
\$20,000 - \$24,999	10,034	9,168	29,609	10,912	11,749	11,153
	770	2,198	8,062	1,319	1,521	4,880
\$25,000 - \$29,999	9,704	14,697	4,963	10,947	9,875	14,392
	852	3,566	765	1,298	1,168	6,222
\$30,000 or more	10,758	12,243	32,444	12,760	11,604	11,583
	598	3,039	20,671	1,194	864	2,301

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,286	\$11,623	\$13,318	\$13,094	\$11,966	\$13,982
	<i>372</i>	<i>982</i>	<i>819</i>	<i>752</i>	<i>544</i>	<i>1,877</i>
Health Status						
Excellent	9,802	10,779	7,794	11,083	12,354	18,273
	<i>1,306</i>	<i>2,110</i>	<i>1,775</i>	<i>2,454</i>	<i>2,010</i>	<i>11,087</i>
Very good	10,234	15,502	10,208	12,694	10,291	13,488
	<i>917</i>	<i>5,299</i>	<i>1,410</i>	<i>2,225</i>	<i>1,084</i>	<i>3,270</i>
Good	10,410	9,851	11,528	12,165	11,716	11,641
	<i>553</i>	<i>1,353</i>	<i>1,322</i>	<i>990</i>	<i>834</i>	<i>2,633</i>
Fair	11,472	10,684	13,108	14,006	12,359	14,385
	<i>698</i>	<i>1,607</i>	<i>1,743</i>	<i>1,714</i>	<i>1,003</i>	<i>3,152</i>
Poor	13,909	13,499	16,116	14,866	13,722	10,077
	<i>930</i>	<i>2,430</i>	<i>1,994</i>	<i>1,843</i>	<i>1,384</i>	<i>3,389</i>
Functional Limitation						
None	10,713	12,565	12,394	12,982	11,527	12,988
	<i>555</i>	<i>1,917</i>	<i>1,385</i>	<i>1,199</i>	<i>832</i>	<i>2,907</i>
IADL only ⁴	11,785	12,195	13,116	14,298	11,318	12,640
	<i>714</i>	<i>1,408</i>	<i>1,357</i>	<i>1,853</i>	<i>796</i>	<i>2,255</i>
One to two ADLs ⁵	11,197	8,986	14,007	12,154	13,827	12,147
	<i>688</i>	<i>1,810</i>	<i>2,480</i>	<i>946</i>	<i>1,367</i>	<i>2,831</i>
Three to five ADLs	11,944	12,168	13,644	12,663	12,350	23,099
	<i>873</i>	<i>2,777</i>	<i>2,162</i>	<i>1,686</i>	<i>1,359</i>	<i>7,831</i>

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,286	\$11,623	\$13,318	\$13,094	\$11,966	\$13,982
	<i>372</i>	<i>982</i>	<i>819</i>	<i>752</i>	<i>544</i>	<i>1,877</i>
Metropolitan Area Resident						
Yes	11,114	12,704	13,721	13,501	12,238	13,902
	<i>483</i>	<i>1,365</i>	<i>1,097</i>	<i>1,100</i>	<i>702</i>	<i>2,212</i>
No	11,793	9,363	12,330	12,355	11,088	14,316
	<i>473</i>	<i>1,011</i>	<i>993</i>	<i>757</i>	<i>623</i>	<i>3,131</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,141	\$1,199	\$1,512	\$1,192	\$1,171	\$832
	<i>51</i>	<i>131</i>	<i>116</i>	<i>107</i>	<i>96</i>	<i>82</i>
Medicare Status³						
Aged						
65 - 74 years	942	1,239	1,134	1,197	851	835
	<i>52</i>	<i>204</i>	<i>120</i>	<i>169</i>	<i>57</i>	<i>105</i>
75 - 84 years	1,117	879	1,251	1,186	1,281	803
	<i>70</i>	<i>212</i>	<i>159</i>	<i>145</i>	<i>110</i>	<i>123</i>
85 years and older	875	726	828	844	990	1,048
	<i>70</i>	<i>147</i>	<i>111</i>	<i>177</i>	<i>127</i>	<i>226</i>
Disabled						
Under 45 years	2,057	1,503	2,170	2,877	2,225	460
	<i>252</i>	<i>470</i>	<i>360</i>	<i>2,031</i>	<i>607</i>	<i>81</i>
45 - 64 years	2,065	1,497	2,201	2,619	2,787	630
	<i>345</i>	<i>287</i>	<i>464</i>	<i>854</i>	<i>1,073</i>	<i>245</i>
Gender						
Male	1,300	1,489	1,798	1,325	1,366	781
	<i>88</i>	<i>192</i>	<i>234</i>	<i>145</i>	<i>177</i>	<i>95</i>
Female	1,021	816	1,355	1,111	1,006	868
	<i>51</i>	<i>104</i>	<i>139</i>	<i>146</i>	<i>70</i>	<i>111</i>
Living Arrangement						
Alone	1,139	985	1,539	1,189	1,142	812
	<i>84</i>	<i>137</i>	<i>199</i>	<i>240</i>	<i>113</i>	<i>118</i>
With spouse	1,139	1,492	1,939	1,188	1,171	751
	<i>74</i>	<i>247</i>	<i>301</i>	<i>121</i>	<i>132</i>	<i>88</i>
With children	973	980	968	933	1,222	967
	<i>87</i>	<i>321</i>	<i>114</i>	<i>151</i>	<i>247</i>	<i>274</i>
With others	1,365	1,077	1,505	1,649	1,282	2,408
	<i>165</i>	<i>300</i>	<i>312</i>	<i>417</i>	<i>245</i>	<i>797</i>

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,141	\$1,199	\$1,512	\$1,192	\$1,171	\$832
	<i>51</i>	<i>131</i>	<i>116</i>	<i>107</i>	<i>96</i>	<i>82</i>
Race/Ethnicity						
White non-Hispanic	1,034	1,035	1,234	1,120	1,109	819
	<i>54</i>	<i>129</i>	<i>126</i>	<i>96</i>	<i>101</i>	<i>73</i>
Black non-Hispanic	1,953	1,762	2,260	2,671	1,951	1,468
	<i>194</i>	<i>396</i>	<i>327</i>	<i>1,009</i>	<i>408</i>	<i>711</i>
Hispanic	1,490	1,451	1,645	2,274	1,413	306
	<i>207</i>	<i>531</i>	<i>275</i>	<i>810</i>	<i>520</i>	<i>167</i>
Other	884	937	841	992	1,148	648
	<i>158</i>	<i>356</i>	<i>167</i>	<i>593</i>	<i>658</i>	<i>0</i>
Income						
Less than \$2,500	1,247	379	2,175	1,060	1,265	314
	<i>262</i>	<i>124</i>	<i>695</i>	<i>207</i>	<i>976</i>	<i>212</i>
\$2,500 - \$4,999	1,865	575	969	6,759	362	94
	<i>1,036</i>	<i>289</i>	<i>206</i>	<i>5,796</i>	<i>128</i>	<i>0</i>
\$5,000 - \$7,499	1,335	798	1,489	947	1,597	1,431
	<i>160</i>	<i>134</i>	<i>210</i>	<i>198</i>	<i>883</i>	<i>1,119</i>
\$7,500 - \$9,999	1,190	760	1,405	1,402	1,000	769
	<i>119</i>	<i>214</i>	<i>223</i>	<i>307</i>	<i>243</i>	<i>318</i>
\$10,000 - \$14,999	1,178	1,195	1,932	1,205	1,130	694
	<i>80</i>	<i>247</i>	<i>367</i>	<i>180</i>	<i>100</i>	<i>187</i>
\$15,000 - \$19,999	1,118	1,903	1,659	1,075	1,101	1,199
	<i>88</i>	<i>420</i>	<i>400</i>	<i>176</i>	<i>127</i>	<i>294</i>
\$20,000 - \$24,999	1,225	1,317	1,135	985	1,660	683
	<i>228</i>	<i>689</i>	<i>612</i>	<i>111</i>	<i>519</i>	<i>105</i>
\$25,000 - \$29,999	1,030	1,403	309	1,207	1,163	757
	<i>106</i>	<i>948</i>	<i>103</i>	<i>212</i>	<i>194</i>	<i>112</i>
\$30,000 or more	1,005	1,642	1,378	1,102	1,043	815
	<i>74</i>	<i>438</i>	<i>496</i>	<i>174</i>	<i>85</i>	<i>103</i>

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,141	\$1,199	\$1,512	\$1,192	\$1,171	\$832
	<i>51</i>	<i>131</i>	<i>116</i>	<i>107</i>	<i>96</i>	<i>82</i>
Health Status						
Excellent	711	1,132	1,360	536	721	602
	<i>56</i>	<i>441</i>	<i>413</i>	<i>56</i>	<i>83</i>	<i>117</i>
Very good	775	1,049	1,086	747	783	568
	<i>46</i>	<i>284</i>	<i>341</i>	<i>44</i>	<i>59</i>	<i>104</i>
Good	1,034	635	873	1,321	1,110	1,035
	<i>82</i>	<i>91</i>	<i>94</i>	<i>239</i>	<i>102</i>	<i>149</i>
Fair	1,346	1,470	1,539	1,577	1,269	991
	<i>96</i>	<i>239</i>	<i>231</i>	<i>176</i>	<i>144</i>	<i>245</i>
Poor	2,398	1,868	2,652	2,300	3,038	1,278
	<i>313</i>	<i>464</i>	<i>400</i>	<i>402</i>	<i>967</i>	<i>314</i>
Functional Limitation						
None	877	1,182	1,157	955	820	769
	<i>42</i>	<i>179</i>	<i>138</i>	<i>118</i>	<i>47</i>	<i>92</i>
IADL only ⁴	1,427	1,057	1,803	1,518	1,512	809
	<i>89</i>	<i>222</i>	<i>269</i>	<i>196</i>	<i>192</i>	<i>118</i>
One to two ADLs ⁵	1,392	1,522	1,642	1,575	1,402	913
	<i>123</i>	<i>326</i>	<i>318</i>	<i>375</i>	<i>151</i>	<i>134</i>
Three to five ADLs	1,774	1,089	1,528	1,478	3,107	1,463
	<i>360</i>	<i>313</i>	<i>231</i>	<i>376</i>	<i>1,365</i>	<i>513</i>

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,141	\$1,199	\$1,512	\$1,192	\$1,171	\$832
	<i>51</i>	<i>131</i>	<i>116</i>	<i>107</i>	<i>96</i>	<i>82</i>
Metropolitan Area Resident						
Yes	1,159	1,476	1,615	1,202	1,188	891
	<i>61</i>	<i>205</i>	<i>153</i>	<i>115</i>	<i>123</i>	<i>109</i>
No	1,095	833	1,270	1,178	1,117	684
	<i>98</i>	<i>128</i>	<i>145</i>	<i>202</i>	<i>102</i>	<i>84</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$2,210	\$1,612	\$2,550	\$2,296	\$2,162	\$2,286
	42	146	151	80	79	137
Medicare Status³						
Aged						
65 - 74 years	1,838	1,112	2,207	1,962	1,753	2,125
	44	129	170	103	86	227
75 - 84 years	2,534	1,755	2,527	2,637	2,584	2,281
	63	198	158	128	126	192
85 years and older	2,570	1,850	2,605	2,368	2,810	3,370
	107	239	153	219	299	368
Disabled						
Under 45 years	2,847	1,851	3,130	3,398	2,890	2,994
	486	352	789	884	540	523
45 - 64 years	2,491	2,148	2,681	2,608	2,593	1,984
	172	477	274	487	323	570
Gender						
Male	2,390	1,819	2,898	2,514	2,338	2,605
	68	229	383	122	115	206
Female	2,070	1,368	2,349	2,159	2,000	2,034
	45	131	100	104	86	157
Living Arrangement						
Alone	2,235	1,456	2,638	2,181	2,250	2,140
	83	126	344	122	122	241
With spouse	2,184	1,829	2,803	2,307	2,086	2,308
	54	310	251	103	93	144
With children	2,261	1,669	2,374	2,245	2,529	2,664
	116	253	193	209	386	520
With others	2,236	1,230	2,246	3,025	2,417	2,776
	121	188	197	403	363	693

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$2,210	\$1,612	\$2,550	\$2,296	\$2,162	\$2,286
	42	146	151	80	79	137
Race/Ethnicity						
White non-Hispanic	2,178	1,388	2,482	2,314	2,151	2,265
	47	117	170	83	92	139
Black non-Hispanic	2,485	2,524	2,582	1,655	2,511	3,182
	176	646	246	243	345	1,006
Hispanic	2,414	1,456	3,107	2,267	1,904	1,824
	239	268	613	356	212	986
Other	1,817	1,732	1,586	2,421	1,918	1,683
	195	476	187	1,035	500	0
Income						
Less than \$2,500	2,366	986	3,981	2,447	1,442	3,861
	510	208	1,926	528	352	1,644
\$2,500 - \$4,999	1,817	1,173	1,961	1,838	2,196	595
	200	366	297	274	910	414
\$5,000 - \$7,499	2,258	1,086	2,463	2,245	2,112	2,897
	195	159	293	306	428	861
\$7,500 - \$9,999	2,290	1,471	2,627	2,241	2,296	3,128
	90	214	182	184	316	1,601
\$10,000 - \$14,999	2,202	1,339	2,509	2,422	2,197	2,007
	84	154	249	209	137	599
\$15,000 - \$19,999	2,196	1,600	2,383	2,350	2,134	2,671
	95	185	354	193	154	601
\$20,000 - \$24,999	2,406	2,677	4,175	2,388	2,484	1,912
	126	625	1,702	199	236	232
\$25,000 - \$29,999	2,098	1,365	1,802	2,073	2,070	2,716
	100	302	677	228	156	404
\$30,000 or more	2,148	2,680	2,924	2,251	2,076	2,189
	86	1,036	798	138	138	169

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$2,210	\$1,612	\$2,550	\$2,296	\$2,162	\$2,286
	42	146	151	80	79	137
Health Status						
Excellent	1,383	887	1,301	1,257	1,163	1,566
	56	166	154	127	96	237
Very good	1,724	997	2,541	1,727	1,543	1,634
	77	99	884	97	93	154
Good	2,118	1,365	1,883	2,213	2,221	2,309
	66	166	125	142	115	181
Fair	2,759	2,183	2,527	3,323	2,753	4,051
	97	458	159	212	172	500
Poor	4,057	2,381	4,026	4,669	5,029	4,536
	221	403	417	449	506	991
Functional Limitation						
None	1,718	1,335	1,650	1,694	1,631	1,844
	40	233	107	62	69	123
IADL only ⁴	2,609	1,728	2,768	2,955	2,610	2,585
	103	188	383	184	156	328
One to two ADLs ⁵	2,895	1,762	3,196	3,207	3,109	3,149
	118	252	456	211	233	560
Three to five ADLs	4,032	2,707	3,604	4,485	4,994	5,083
	222	565	282	473	615	1,055

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$2,210	\$1,612	\$2,550	\$2,296	\$2,162	\$2,286
	<i>42</i>	<i>146</i>	<i>151</i>	<i>80</i>	<i>79</i>	<i>137</i>
Metropolitan Area Resident						
Yes	2,343	1,890	2,748	2,490	2,271	2,360
	<i>48</i>	<i>227</i>	<i>200</i>	<i>106</i>	<i>94</i>	<i>141</i>
No	1,819	1,174	2,037	1,971	1,785	2,074
	<i>75</i>	<i>134</i>	<i>147</i>	<i>121</i>	<i>96</i>	<i>302</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$974	\$764	\$1,216	\$860	\$1,091	\$1,283
	14	36	55	22	20	75
Medicare Status³						
Aged						
65 - 74 years	913	683	1,104	870	1,028	1,230
	23	49	109	38	36	106
75 - 84 years	945	606	1,113	859	1,081	1,210
	18	41	87	24	33	91
85 years and older	843	609	923	814	847	1,399
	25	70	74	38	42	218
Disabled						
Under 45 years	1,267	1,059	1,388	1,299	1,197	682
	73	243	109	310	144	308
45 - 64 years	1,381	990	1,519	835	1,682	2,968
	63	96	124	149	103	847
Gender						
Male	928	838	1,066	799	1,054	1,168
	19	60	64	29	36	101
Female	1,009	677	1,304	897	1,122	1,374
	18	35	78	26	26	91
Living Arrangement						
Alone	953	717	1,244	850	982	1,195
	27	51	105	30	39	101
With spouse	980	831	1,133	856	1,143	1,302
	18	57	72	29	30	106
With children	974	607	1,195	943	1,019	1,545
	32	60	76	73	84	257
With others	1,014	833	1,274	845	998	1,365
	60	154	136	80	96	321

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$974	\$764	\$1,216	\$860	\$1,091	\$1,283
	14	36	55	22	20	75
Race/Ethnicity						
White non-Hispanic	987	803	1,342	857	1,103	1,289
	16	43	85	22	22	79
Black non-Hispanic	930	674	1,059	821	1,107	1,268
	56	75	126	140	111	333
Hispanic	904	630	1,175	799	841	862
	45	128	99	103	99	282
Other	911	923	866	1,408	1,005	1,736
	79	265	122	424	181	0
Income						
Less than \$2,500	884	767	1,011	815	1,022	1,458
	80	137	152	131	209	539
\$2,500 - \$4,999	869	503	1,019	856	907	852
	82	87	141	200	256	653
\$5,000 - \$7,499	1,063	508	1,215	904	913	1,828
	75	50	111	67	103	612
\$7,500 - \$9,999	988	646	1,246	889	1,117	1,273
	35	71	78	51	112	340
\$10,000 - \$14,999	913	753	1,206	835	955	1,536
	31	73	113	49	51	261
\$15,000 - \$19,999	900	753	1,335	863	1,000	1,162
	25	77	127	49	44	155
\$20,000 - \$24,999	1,049	762	1,466	855	1,261	1,340
	41	77	423	60	84	139
\$25,000 - \$29,999	1,040	1,338	1,178	782	1,230	1,390
	55	480	280	57	112	191
\$30,000 or more	977	1,214	1,453	885	1,082	1,203
	21	151	521	39	28	117

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$974	\$764	\$1,216	\$860	\$1,091	\$1,283
	<i>14</i>	<i>36</i>	<i>55</i>	<i>22</i>	<i>20</i>	<i>75</i>
Health Status						
Excellent	592	491	724	510	643	894
	<i>20</i>	<i>62</i>	<i>72</i>	<i>29</i>	<i>38</i>	<i>107</i>
Very good	758	516	883	686	841	1,044
	<i>22</i>	<i>44</i>	<i>68</i>	<i>29</i>	<i>34</i>	<i>117</i>
Good	982	772	1,062	908	1,140	1,337
	<i>21</i>	<i>69</i>	<i>57</i>	<i>39</i>	<i>40</i>	<i>93</i>
Fair	1,205	887	1,271	1,118	1,382	1,935
	<i>40</i>	<i>80</i>	<i>118</i>	<i>38</i>	<i>63</i>	<i>296</i>
Poor	1,572	1,007	1,728	1,319	1,943	1,932
	<i>58</i>	<i>101</i>	<i>153</i>	<i>68</i>	<i>112</i>	<i>425</i>
Functional Limitation						
None	803	694	936	730	893	1,088
	<i>14</i>	<i>47</i>	<i>40</i>	<i>23</i>	<i>28</i>	<i>79</i>
IADL only ⁴	1,163	878	1,278	1,061	1,338	1,532
	<i>42</i>	<i>89</i>	<i>120</i>	<i>47</i>	<i>56</i>	<i>194</i>
One to two ADLs ⁵	1,200	644	1,415	1,059	1,421	1,688
	<i>35</i>	<i>52</i>	<i>109</i>	<i>53</i>	<i>70</i>	<i>169</i>
Three to five ADLs	1,398	1,081	1,593	1,063	1,738	1,826
	<i>61</i>	<i>150</i>	<i>163</i>	<i>76</i>	<i>138</i>	<i>209</i>

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$974	\$764	\$1,216	\$860	\$1,091	\$1,283
	<i>14</i>	<i>36</i>	<i>55</i>	<i>22</i>	<i>20</i>	<i>75</i>
Metropolitan Area Resident						
Yes	967	773	1,214	870	1,078	1,249
	<i>15</i>	<i>46</i>	<i>55</i>	<i>29</i>	<i>25</i>	<i>81</i>
No	998	750	1,227	847	1,143	1,385
	<i>36</i>	<i>58</i>	<i>139</i>	<i>26</i>	<i>35</i>	<i>153</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

1 of 4

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$11,286	\$9,822	\$106	\$903	\$345	\$110
	372	356	9	78	39	17
Medicare Status²						
Aged						
65 - 74 years	11,636	10,125	90	870	477	76
	620	590	15	128	104	26
75 - 84 years	10,696	9,563	59	733	223	118
	571	561	7	55	31	30
85 years and older	9,364	8,380	92	617	233	41
	518	499	12	58	48	24
Disabled						
Under 45 years	14,093	11,183	469	1,992	293	157
	1,806	1,754	69	705	58	60
45 - 64 years	13,658	11,086	207	1,611	469	285
	1,445	1,450	47	376	100	70
Gender						
Male	12,321	10,655	91	974	403	198
	510	519	14	98	71	32
Female	10,380	9,094	118	841	294	32
	431	404	11	93	80	10
Marital Status						
Married	11,779	9,969	49	1,211	427	123
	487	496	10	128	90	29
Widowed	10,192	9,140	105	605	284	59
	438	413	9	47	76	16
Divorced/separated	12,162	10,748	233	674	257	250
	1,419	1,427	34	243	74	96
Never married	12,439	11,306	382	502	170	79
	1,586	1,558	70	152	38	34

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$11,286	\$9,822	\$106	\$903	\$345	\$110
	<i>372</i>	<i>356</i>	<i>9</i>	<i>78</i>	<i>39</i>	<i>17</i>
Race/Ethnicity						
White non-Hispanic	11,037	9,533	70	972	358	105
	<i>345</i>	<i>336</i>	<i>7</i>	<i>88</i>	<i>48</i>	<i>18</i>
Black non-Hispanic	13,159	11,770	322	641	300	127
	<i>1,171</i>	<i>1,095</i>	<i>56</i>	<i>209</i>	<i>35</i>	<i>57</i>
Hispanic	11,927	10,792	197	510	299	129
	<i>1,584</i>	<i>1,565</i>	<i>29</i>	<i>123</i>	<i>98</i>	<i>51</i>
Other	10,706	9,563	184	764	109	87
	<i>2,758</i>	<i>2,640</i>	<i>61</i>	<i>410</i>	<i>49</i>	<i>40</i>
Income						
Less than \$2,500	8,916	7,900	408	321	164	122
	<i>1,371</i>	<i>1,203</i>	<i>274</i>	<i>79</i>	<i>40</i>	<i>87</i>
\$2,500 - \$4,999	11,535	8,776	209	655	1,793	102
	<i>2,440</i>	<i>1,760</i>	<i>41</i>	<i>267</i>	<i>1,586</i>	<i>46</i>
\$5,000 - \$7,499	12,497	11,527	520	277	138	35
	<i>1,089</i>	<i>1,079</i>	<i>51</i>	<i>65</i>	<i>27</i>	<i>18</i>
\$7,500 - \$9,999	10,688	9,295	214	498	528	153
	<i>817</i>	<i>764</i>	<i>27</i>	<i>75</i>	<i>198</i>	<i>71</i>
\$10,000 - \$14,999	12,802	11,403	56	915	298	130
	<i>1,156</i>	<i>1,136</i>	<i>11</i>	<i>207</i>	<i>73</i>	<i>42</i>
\$15,000 - \$19,999	12,159	10,826	27	963	199	144
	<i>1,133</i>	<i>1,103</i>	<i>8</i>	<i>118</i>	<i>49</i>	<i>53</i>
\$20,000 - \$24,999	10,034	8,524	12	998	417	83
	<i>770</i>	<i>774</i>	<i>10</i>	<i>182</i>	<i>140</i>	<i>43</i>
\$25,000 - \$29,999	9,704	8,555	7	819	155	168
	<i>852</i>	<i>819</i>	<i>7</i>	<i>94</i>	<i>50</i>	<i>95</i>
\$30,000 or more	10,758	8,928	6	1,382	363	79
	<i>598</i>	<i>562</i>	<i>4</i>	<i>224</i>	<i>93</i>	<i>30</i>

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$11,286	\$9,822	\$106	\$903	\$345	\$110
	<i>372</i>	<i>356</i>	<i>9</i>	<i>78</i>	<i>39</i>	<i>17</i>
Health Status						
Excellent	9,802	8,485	33	997	239	48
	<i>1,306</i>	<i>1,279</i>	<i>9</i>	<i>478</i>	<i>81</i>	<i>33</i>
Very good	10,234	9,238	50	707	154	86
	<i>917</i>	<i>901</i>	<i>9</i>	<i>95</i>	<i>39</i>	<i>34</i>
Good	10,410	8,865	88	967	372	118
	<i>553</i>	<i>497</i>	<i>11</i>	<i>141</i>	<i>111</i>	<i>37</i>
Fair	11,472	9,960	104	824	428	156
	<i>698</i>	<i>657</i>	<i>14</i>	<i>93</i>	<i>88</i>	<i>37</i>
Poor	13,909	12,114	222	1,084	414	74
	<i>930</i>	<i>925</i>	<i>40</i>	<i>211</i>	<i>108</i>	<i>25</i>
Functional Limitation						
None	10,713	9,361	52	916	282	102
	<i>555</i>	<i>524</i>	<i>7</i>	<i>119</i>	<i>84</i>	<i>23</i>
IADL only ³	11,785	10,298	171	871	350	95
	<i>714</i>	<i>702</i>	<i>20</i>	<i>103</i>	<i>96</i>	<i>27</i>
One to two ADLs ⁴	11,197	9,515	103	936	505	138
	<i>688</i>	<i>623</i>	<i>24</i>	<i>138</i>	<i>170</i>	<i>57</i>
Three to five ADLs	11,944	10,504	139	884	295	121
	<i>873</i>	<i>849</i>	<i>22</i>	<i>214</i>	<i>57</i>	<i>53</i>

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Inpatient Hospital Stay in 1998¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$11,286	\$9,822	\$106	\$903	\$345	\$110
	<i>372</i>	<i>356</i>	<i>9</i>	<i>78</i>	<i>39</i>	<i>17</i>
Metropolitan Area Resident						
Yes	11,114	9,686	95	911	315	106
	<i>483</i>	<i>460</i>	<i>11</i>	<i>90</i>	<i>30</i>	<i>19</i>
No	11,793	10,225	135	880	432	121
	<i>473</i>	<i>525</i>	<i>15</i>	<i>147</i>	<i>135</i>	<i>38</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,141	\$651	\$49	\$266	\$134	\$40
	<i>51</i>	<i>25</i>	<i>8</i>	<i>15</i>	<i>20</i>	<i>5</i>
Medicare Status²						
Aged						
65 - 74 years	942	520	26	235	117	44
	<i>52</i>	<i>24</i>	<i>5</i>	<i>13</i>	<i>30</i>	<i>9</i>
75 - 84 years	1,117	660	21	297	109	29
	<i>70</i>	<i>36</i>	<i>3</i>	<i>20</i>	<i>22</i>	<i>6</i>
85 years and older	875	528	23	226	74	23
	<i>70</i>	<i>44</i>	<i>5</i>	<i>27</i>	<i>12</i>	<i>10</i>
Disabled						
Under 45 years	2,057	1,116	447	304	146	45
	<i>252</i>	<i>162</i>	<i>171</i>	<i>71</i>	<i>25</i>	<i>13</i>
45 - 64 years	2,065	1,184	107	342	356	77
	<i>345</i>	<i>161</i>	<i>29</i>	<i>112</i>	<i>121</i>	<i>24</i>
Gender						
Male	1,300	713	51	305	155	75
	<i>88</i>	<i>38</i>	<i>15</i>	<i>27</i>	<i>33</i>	<i>11</i>
Female	1,021	603	47	237	118	14
	<i>51</i>	<i>28</i>	<i>7</i>	<i>13</i>	<i>25</i>	<i>4</i>
Marital Status						
Married	1,169	628	19	324	159	40
	<i>78</i>	<i>33</i>	<i>2</i>	<i>24</i>	<i>35</i>	<i>7</i>
Widowed	973	593	42	225	92	22
	<i>47</i>	<i>33</i>	<i>7</i>	<i>15</i>	<i>12</i>	<i>5</i>
Divorced/separated	1,300	757	157	133	143	110
	<i>155</i>	<i>104</i>	<i>70</i>	<i>20</i>	<i>26</i>	<i>35</i>
Never married	1,518	998	195	173	121	32
	<i>169</i>	<i>125</i>	<i>58</i>	<i>38</i>	<i>27</i>	<i>9</i>

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

2 of 4

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,141	\$651	\$49	\$266	\$134	\$40
	<i>51</i>	<i>25</i>	<i>8</i>	<i>15</i>	<i>20</i>	<i>5</i>
Race/Ethnicity						
White non-Hispanic	1,034	554	28	286	129	36
	<i>54</i>	<i>21</i>	<i>6</i>	<i>17</i>	<i>24</i>	<i>5</i>
Black non-Hispanic	1,953	1,354	132	200	203	63
	<i>194</i>	<i>156</i>	<i>20</i>	<i>25</i>	<i>27</i>	<i>14</i>
Hispanic	1,490	934	198	164	130	64
	<i>207</i>	<i>137</i>	<i>93</i>	<i>28</i>	<i>46</i>	<i>26</i>
Other	884	610	63	105	60	46
	<i>158</i>	<i>117</i>	<i>13</i>	<i>35</i>	<i>19</i>	<i>18</i>
Income						
Less than \$2,500	1,247	647	322	154	88	36
	<i>262</i>	<i>142</i>	<i>202</i>	<i>38</i>	<i>23</i>	<i>16</i>
\$2,500 - \$4,999	1,865	482	110	240	978	55
	<i>1,036</i>	<i>84</i>	<i>25</i>	<i>137</i>	<i>880</i>	<i>35</i>
\$5,000 - \$7,499	1,335	906	247	84	88	11
	<i>160</i>	<i>110</i>	<i>71</i>	<i>20</i>	<i>20</i>	<i>3</i>
\$7,500 - \$9,999	1,190	766	104	127	117	75
	<i>119</i>	<i>88</i>	<i>15</i>	<i>16</i>	<i>30</i>	<i>26</i>
\$10,000 - \$14,999	1,178	731	42	226	134	45
	<i>80</i>	<i>59</i>	<i>5</i>	<i>17</i>	<i>15</i>	<i>10</i>
\$15,000 - \$19,999	1,118	683	11	270	94	60
	<i>88</i>	<i>58</i>	<i>3</i>	<i>29</i>	<i>10</i>	<i>21</i>
\$20,000 - \$24,999	1,225	577	2	377	222	46
	<i>228</i>	<i>63</i>	<i>1</i>	<i>87</i>	<i>96</i>	<i>17</i>
\$25,000 - \$29,999	1,030	575	2	344	80	31
	<i>106</i>	<i>56</i>	<i>1</i>	<i>47</i>	<i>13</i>	<i>18</i>
\$30,000 or more	1,005	530	1	336	111	26
	<i>74</i>	<i>35</i>	<i>1</i>	<i>26</i>	<i>22</i>	<i>5</i>

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,141	\$651	\$49	\$266	\$134	\$40
	51	25	8	15	20	5
Health Status						
Excellent	711	412	10	172	73	43
	56	40	3	18	11	20
Very good	775	436	37	202	64	36
	46	19	25	14	7	12
Good	1,034	554	24	267	156	33
	82	38	5	17	45	8
Fair	1,346	839	78	260	114	55
	96	70	14	19	12	10
Poor	2,398	1,343	140	534	339	42
	313	143	33	113	117	9
Functional Limitation						
None	877	507	16	218	99	36
	42	19	2	11	24	6
IADL only ³	1,427	816	104	314	139	54
	89	54	30	31	20	14
One to two ADLs ⁴	1,392	797	76	296	190	33
	123	78	24	28	41	7
Three to five ADLs	1,774	943	78	425	280	47
	360	110	12	136	149	16

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Outpatient Hospital Visit in 1998¹

4 of 4

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,141	\$651	\$49	\$266	\$134	\$40
	<i>51</i>	<i>25</i>	<i>8</i>	<i>15</i>	<i>20</i>	<i>5</i>
Metropolitan Area Resident						
Yes	1,159	662	56	275	129	38
	<i>61</i>	<i>28</i>	<i>11</i>	<i>19</i>	<i>21</i>	<i>6</i>
No	1,095	622	31	245	149	48
	<i>98</i>	<i>52</i>	<i>4</i>	<i>18</i>	<i>48</i>	<i>7</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$2,210	\$1,445	\$69	\$314	\$348	\$35
	42	25	19	12	13	6
Medicare Status²						
Aged						
65 - 74 years	1,838	1,232	24	278	283	22
	44	28	3	11	15	3
75 - 84 years	2,534	1,753	21	353	385	22
	63	46	2	16	23	4
85 years and older	2,570	1,755	31	315	454	14
	107	57	3	40	56	4
Disabled						
Under 45 years	2,847	1,130	913	322	408	73
	486	105	470	77	64	22
45 - 64 years	2,491	1,372	147	366	453	152
	172	96	40	63	36	60
Gender						
Male	2,390	1,545	93	350	343	59
	68	37	41	20	16	12
Female	2,070	1,366	50	285	352	15
	45	29	6	12	18	3
Marital Status						
Married	2,186	1,414	22	366	346	37
	53	32	5	17	19	9
Widowed	2,210	1,524	35	280	354	17
	64	40	2	17	21	3
Divorced/separated	2,350	1,409	316	200	357	68
	214	87	184	30	36	32
Never married	2,231	1,373	311	181	324	43
	189	103	143	30	56	13

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

2 of 4

Beneficiary Characteristic	Source of Payment					Other Source
	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$2,210	\$1,445	\$69	\$314	\$348	\$35
	42	25	19	12	13	6
Race/Ethnicity						
White non-Hispanic	2,178	1,417	36	340	357	28
	47	27	11	14	16	4
Black non-Hispanic	2,485	1,711	135	196	339	104
	176	102	36	29	31	54
Hispanic	2,414	1,537	372	181	298	27
	239	88	233	23	37	9
Other	1,817	1,222	92	214	239	50
	195	132	17	52	65	18
Income						
Less than \$2,500	2,366	1,303	529	168	322	45
	510	118	486	29	40	13
\$2,500 - \$4,999	1,817	1,220	200	176	189	33
	200	140	75	38	33	9
\$5,000 - \$7,499	2,258	1,504	382	92	266	14
	195	77	183	11	28	3
\$7,500 - \$9,999	2,290	1,636	108	176	328	42
	90	74	13	18	26	11
\$10,000 - \$14,999	2,202	1,491	55	271	349	35
	84	55	17	19	31	16
\$15,000 - \$19,999	2,196	1,457	11	328	362	37
	95	61	2	29	40	8
\$20,000 - \$24,999	2,406	1,498	11	436	428	33
	126	71	7	46	47	8
\$25,000 - \$29,999	2,098	1,400	9	341	331	16
	100	64	6	23	34	5
\$30,000 or more	2,148	1,344	1	405	357	42
	86	41	0	28	32	16

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$2,210	\$1,445	\$69	\$314	\$348	\$35
	42	25	19	12	13	6
Health Status						
Excellent	1,383	911	7	186	234	45
	56	39	1	12	12	21
Very good	1,724	1,115	82	237	276	14
	77	28	60	11	22	2
Good	2,118	1,405	31	315	344	22
	66	38	3	20	24	4
Fair	2,759	1,846	88	360	396	70
	97	60	17	23	23	25
Poor	4,057	2,514	218	625	650	50
	221	126	91	63	81	12
Functional Limitation						
None	1,718	1,170	19	252	250	27
	40	25	3	12	10	8
IADL only ³	2,609	1,655	152	386	386	31
	103	48	74	33	29	5
One to two ADLs ⁴	2,895	1,848	141	389	468	48
	118	85	66	25	28	11
Three to five ADLs	4,032	2,461	105	487	894	85
	222	133	14	57	126	43

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Physician/Supplier Service in 1998¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$2,210	\$1,445	\$69	\$314	\$348	\$35
	<i>42</i>	<i>25</i>	<i>19</i>	<i>12</i>	<i>13</i>	<i>6</i>
Metropolitan Area Resident						
Yes	2,343	1,554	78	319	355	37
	<i>48</i>	<i>31</i>	<i>25</i>	<i>13</i>	<i>15</i>	<i>8</i>
No	1,819	1,123	41	299	329	27
	<i>75</i>	<i>44</i>	<i>5</i>	<i>24</i>	<i>27</i>	<i>3</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Dental Service in 1998¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$559	\$4	\$5	\$95	\$441	\$15
	18	0	1	6	15	3
Medicare Status²						
Aged						
65 - 74 years	598	4	3	100	477	15
	27	0	1	9	23	6
75 - 84 years	536	4	4	91	429	7
	28	0	2	10	23	3
85 years and older	511	4	1	90	412	3
	55	0	1	25	44	3
Disabled						
Under 45 years	310	1	31	80	179	20
	42	0	9	23	27	5
45 - 64 years	540	2	16	86	385	51
	79	0	4	14	72	13
Gender						
Male	559	4	5	99	433	19
	23	0	1	10	20	4
Female	560	4	6	92	447	11
	26	0	2	7	21	6
Marital Status						
Married	550	4	2	102	426	15
	21	0	1	9	18	5
Widowed	606	3	4	85	508	6
	42	0	2	11	38	3
Divorced/separated	596	4	23	115	432	21
	51	1	7	25	50	12
Never married	430	2	17	44	337	30
	56	0	4	8	54	8

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Dental Service in 1998¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$559	\$4	\$5	\$95	\$441	\$15
	18	0	1	6	15	3
Race/Ethnicity						
White non-Hispanic	575	4	3	97	458	13
	20	0	1	6	17	4
Black non-Hispanic	447	4	11	93	317	22
	69	0	4	53	34	8
Hispanic	461	5	35	78	328	16
	62	1	10	19	55	3
Other	449	3	23	52	325	47
	71	1	12	15	69	20
Income						
Less than \$2,500	508	3	16	13	420	56
	65	1	7	5	46	27
\$2,500 - \$4,999	628	3	16	76	523	9
	219	1	9	40	202	10
\$5,000 - \$7,499	361	1	29	33	284	14
	42	0	10	15	41	6
\$7,500 - \$9,999	501	4	34	17	432	14
	81	1	9	4	82	6
\$10,000 - \$14,999	457	4	11	68	361	12
	35	0	4	12	30	7
\$15,000 - \$19,999	502	4	2	88	380	29
	49	0	1	11	33	26
\$20,000 - \$24,999	494	3	0	106	363	21
	44	0	0	19	35	12
\$25,000 - \$29,999	461	4	1	80	374	2
	56	1	1	13	55	1
\$30,000 or more	672	4	0	125	532	11
	33	1	0	12	28	2

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Dental Service in 1998¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$559	\$4	\$5	\$95	\$441	\$15
	<i>18</i>	<i>0</i>	<i>1</i>	<i>6</i>	<i>15</i>	<i>3</i>
Health Status						
Excellent	610	4	2	124	456	24
	<i>49</i>	<i>0</i>	<i>1</i>	<i>22</i>	<i>32</i>	<i>18</i>
Very good	543	4	2	78	449	10
	<i>35</i>	<i>0</i>	<i>1</i>	<i>9</i>	<i>31</i>	<i>4</i>
Good	508	3	4	89	405	7
	<i>23</i>	<i>0</i>	<i>1</i>	<i>9</i>	<i>19</i>	<i>2</i>
Fair	620	3	15	103	472	27
	<i>56</i>	<i>0</i>	<i>5</i>	<i>14</i>	<i>50</i>	<i>9</i>
Poor	634	6	14	112	485	17
	<i>114</i>	<i>3</i>	<i>5</i>	<i>25</i>	<i>105</i>	<i>4</i>
Functional Limitation						
None	584	4	3	98	467	13
	<i>22</i>	<i>0</i>	<i>1</i>	<i>8</i>	<i>19</i>	<i>5</i>
IADL only ³	469	3	12	77	361	17
	<i>28</i>	<i>0</i>	<i>3</i>	<i>10</i>	<i>25</i>	<i>5</i>
One to two ADLs ⁴	546	5	8	105	415	13
	<i>54</i>	<i>2</i>	<i>3</i>	<i>16</i>	<i>48</i>	<i>9</i>
Three to five ADLs	615	4	11	98	463	39
	<i>137</i>	<i>1</i>	<i>6</i>	<i>22</i>	<i>119</i>	<i>12</i>

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Dental Service in 1998¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$559	\$4	\$5	\$95	\$441	\$15
	<i>18</i>	<i>0</i>	<i>1</i>	<i>6</i>	<i>15</i>	<i>3</i>
Metropolitan Area Resident						
Yes	590	4	6	106	459	15
	<i>20</i>	<i>0</i>	<i>1</i>	<i>8</i>	<i>17</i>	<i>4</i>
No	449	1	5	54	377	12
	<i>46</i>	<i>0</i>	<i>2</i>	<i>8</i>	<i>39</i>	<i>3</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	
Expenditures per User	\$974	\$42	\$116	\$331	\$410	\$75
	14	1	9	7	6	5
Medicare Status²						
Aged						
65 - 74 years	913	41	80	346	380	65
	23	2	12	12	9	7
75 - 84 years	945	48	68	324	448	57
	18	2	10	12	11	5
85 years and older	843	49	75	227	438	55
	25	4	10	16	17	9
Disabled						
Under 45 years	1,267	9	567	205	313	173
	73	2	57	29	30	38
45 - 64 years	1,381	30	308	430	456	157
	63	4	39	37	24	24
Gender						
Male	928	45	83	330	366	105
	19	2	8	13	8	8
Female	1,009	39	142	332	444	52
	18	2	14	10	8	5
Marital Status						
Married	981	42	43	406	415	74
	18	2	5	11	10	7
Widowed	941	42	144	259	434	62
	25	2	21	11	10	8
Divorced/separated	1,038	44	292	242	352	109
	41	3	27	21	20	17
Never married	980	31	369	160	331	90
	38	3	34	16	20	22

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$974	\$42	\$116	\$331	\$410	\$75
	14	1	9	7	6	5
Race/Ethnicity						
White non-Hispanic	987	41	80	365	430	71
	16	1	9	8	7	6
Black non-Hispanic	930	44	256	230	320	80
	56	4	44	25	16	14
Hispanic	904	52	311	130	335	77
	45	5	41	14	20	18
Other	911	42	239	158	314	159
	79	6	40	36	39	49
Income						
Less than \$2,500	884	46	130	216	357	136
	80	7	33	43	33	35
\$2,500 - \$4,999	869	20	351	95	313	90
	82	5	51	28	41	34
\$5,000 - \$7,499	1,063	23	644	69	282	46
	75	2	76	9	14	8
\$7,500 - \$9,999	988	45	300	127	407	108
	35	4	31	12	15	16
\$10,000 - \$14,999	913	51	89	256	418	99
	31	3	17	20	13	14
\$15,000 - \$19,999	900	44	38	304	441	73
	25	3	8	16	17	10
\$20,000 - \$24,999	1,049	41	10	474	456	68
	41	3	5	33	17	13
\$25,000 - \$29,999	1,040	46	7	496	419	72
	55	4	2	43	20	17
\$30,000 or more	977	40	2	459	420	57
	21	3	1	15	12	8

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$974	\$42	\$116	\$331	\$410	\$75
	14	1	9	7	6	5
Health Status						
Excellent	592	47	29	218	262	36
	20	3	5	13	11	7
Very good	758	47	40	295	338	39
	22	2	5	16	10	5
Good	982	42	94	351	419	75
	21	2	7	14	12	8
Fair	1,205	39	199	349	502	115
	40	2	30	17	15	12
Poor	1,572	23	347	474	588	140
	58	3	48	37	23	18
Functional Limitation						
None	803	46	56	295	349	56
	14	1	4	9	8	5
IADL only ³	1,163	36	190	367	475	96
	42	3	28	19	13	12
One to two ADLs ⁴	1,200	36	161	404	504	95
	35	3	24	22	17	14
Three to five ADLs	1,398	34	306	386	542	130
	61	3	51	40	23	24

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1998

Community-Only Residents with at Least One Prescribed Medicine in 1998¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$974	\$42	\$116	\$331	\$410	\$75
	<i>14</i>	<i>1</i>	<i>9</i>	<i>7</i>	<i>6</i>	<i>5</i>
Metropolitan Area Resident						
Yes	967	53	109	344	388	73
	<i>15</i>	<i>2</i>	<i>8</i>	<i>9</i>	<i>8</i>	<i>6</i>
No	998	8	138	292	479	80
	<i>36</i>	<i>2</i>	<i>25</i>	<i>12</i>	<i>11</i>	<i>10</i>

Source: Medicare Current Beneficiary Survey, CY 1998 Cost and Use Public Use File.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.